

SENIOR COLLOQUIUM SCHEDULING

Please return this form no later than **5:00 PM Friday, March 14, 2008**, to Dr. Davidson in room 219 MSB or to his mailbox in the main office, room 233 MSB.

Name: _____

Mark **ALL** dates and times below at which you will be available for the Senior Colloquium. Please be as flexible as possible so as to allow us to find times when everyone can participate. (In particular, if you have a class immediately before or after one of the times, please mark that time as available and make a note. You could be scheduled early or late in the session so that it does not conflict with your class.)

Monday, April 14	11:00 – 12:15 ____	2:15 – 3:30 ____	5:30 – 6:45 ____
Tuesday, April 15	9:15 – 10:30 ____	12:30 – 1:45 ____	3:45 – 5:00 ____
Wednesday, April 16	11:00 – 12:15 ____	2:15 – 3:30 ____	5:30 – 6:45 ____
Thursday, April 17	9:15 – 10:30 ____	12:30 – 1:45 ____	3:45 – 5:00 ____
Friday, April 18	11:00 – 12:15 ____	2:15 – 3:30 ____	
Monday, April 21	11:00 – 12:15 ____	2:15 – 3:30 ____	5:30 – 6:45 ____
Tuesday, April 22	9:15 – 10:30 ____	12:30 – 1:45 ____	3:45 – 5:00 ____
Wednesday, April 23	11:00 – 12:15 ____	2:15 – 3:30 ____	5:30 – 6:45 ____
Thursday, April 24	9:15 – 10:30 ____	12:30 – 1:45 ____	3:45 – 5:00 ____
Friday, April 25	11:00 – 12:15 ____	2:15 – 3:30 ____	

Please indicate your topic and have the faculty member approving the topic sign below.

Topic for Senior Colloquium: _____

Faculty Approval: _____

Special Equipment Needed: _____