

SENIOR COLLOQUIUM SCHEDULING

Please return this form no later than **5:00 PM Monday, April 3, 2006**, to Dr. White in room 212 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 17	11:00 – 12:15 ____	2:15 – 3:30 ____	5:30 – 6:45 ____
Tuesday, April 18	9:15 – 10:30 ____	12:30 – 1:45 ____	3:45 – 5:00 ____
Wednesday, April 19	11:00 – 12:15 ____	2:15 – 3:30 ____	5:30 – 6:45 ____
Thursday, April 20	9:15 – 10:30 ____	12:30 – 1:45 ____	3:45 – 5:00 ____
Friday, April 21	11:00 – 12:15 ____	2:15 – 3:30 ____	
Monday, April 24	11:00 – 12:15 ____	2:15 – 3:30 ____	5:30 – 6:45 ____
Tuesday, April 25	9:15 – 10:30 ____	12:30 – 1:45 ____	3:45 – 5:00 ____
Wednesday, April 26	11:00 – 12:15 ____	2:15 – 3:30 ____	5:30 – 6:45 ____
Thursday, April 27	9:15 – 10:30 ____	12:30 – 1:45 ____	3:45 – 5:00 ____
Friday, April 28	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: _____