



Supplemental Instruction Instructor Interest Form

Instructor Name: _____ Date: _____

Department: _____ FT: PT:

e-mail: _____ Phone#: _____

Office: _____

Please list the classes that you would like an SI session for. Also, if you know of a student you would like as your SI Coach, please list identify that student by name*.

(*These are suggested, but not guaranteed. The final assignment of SI Coach will be made by the SI Coordinator)

Course: _____
course number and name

SI Coach Name: _____

Course: _____
course number and name

SI Coach Name: _____

Course: _____
course number and name

SI Coach
Name: _____

Please return this form to Syria Purdom at spurdom@elcamino.edu or Denise Blood at dblood@elcamino.edu. Your interest is appreciated and every effort will be made to set up and SI section for the class(es) requested. If you don't have an SI Coach in mind, one will be carefully chosen and matched with you and the class.

Thank you.