



Mary Persons High School Media Center Cooperative Planning Form

Teacher's Name _____ Room # _____

Dates Requested for Media Center Visit: _____

Periods Requested: 1 2 3 4 5(1st) 5(2nd) 5(3rd) 6 7

Research Topic: _____

Students will need the following materials or instruction:

___ Media Center orientation regarding location of assigned research materials.

___ Media Specialist instruction on the use of GALILEO.

___ Please pull materials for class use. (Attach list of requested materials)

___ Allow students to pull materials needed.

___ Other _____ (See Media Specialist for ideas)

We look forward to working with you and your students. Please initial the following checklist.

___ Class visit has been scheduled at least 24 hours in advance with Media Specialist.

___ Visit has been listed in your lesson plans.

___ Visit will be a joint learning venture between teacher, students and Media Specialist.

___ I will assume full responsibility for student permission to use the Internet and will monitor students will accessing Internet sites.

___ I will be actively involved with my class as they do research.

___ I will make sure my students act in an appropriate manner while they are in the media center.

___ I will not use my scheduled library visit as a time to read newspapers, magazines, grade papers or run errands.

Date Received _____ Media Specialist _____