



Tallahassee State College Textbook Request

Division:

Semester:

Year:

Course ID:		Course Title:	
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List the names of Faculty who are participating in the textbook review/selection process for this course.	1.
	2.
	3.
	4.
	5.
	6.

Will you keep current textbook? Yes No

ATTN: Meeting minutes must be attached. Include discussions on affordability and the usage of OER.

Please enter textbook details below:

Author(s):	
Title & Edition:	
Publisher:	
ISBN:	
Date of first use (term):	

Submitted by: _____ Date: _____
Instructor/ Program Chair signature

Approved by: _____ Date: _____
Dean/ Division Director signature

Division Contact: _____ Phone: _____ Email: _____

Please upload this form to the portal.

Note: at least 45 days prior to start of semester in which text will be used.

Certification: This textbook selection complies with TSC Policy po4240 and all relevant Florida Statute and Administrative Code.