

## Assignment Alert Form

Please send to Dally Memorial Library  
Mail it: 37325 Mound Street, Sardis, OH 43946  
Phone it: (740) 483-2244  
Fax it: (740) 483-2311  
email it: [dallylibrary@sbcglobal.net](mailto:dallylibrary@sbcglobal.net)

Please be prepared to offer all information on this form when calling or e-mailing.  
Thank you for helping us help your students!

Teacher's name: \_\_\_\_\_ e-Mail: \_\_\_\_\_

School name: \_\_\_\_\_ School phone: \_\_\_\_\_

Grade working on this assignment: \_\_\_\_\_ Number of students in class: \_\_\_\_\_

Date assignment given: \_\_\_\_\_ Due Date: \_\_\_\_\_

Is this assignment given every year?     Yes         No

If yes, please let us know if the assignment changes. It is not necessary to turn in a form every year for repetitive assignments.

Please attach a copy of the assignment as given to the students or describe it here.

What is the objective of the assignment?

- Learn library skills
- Identify sources
- Demonstrate knowledge of subject matter
- Create an accurate bibliography
- Other \_\_\_\_\_  
\_\_\_\_\_