Writing Center Walk-in Request for Appointment (ASAP)

Student’s Name: ___________________________________________          Date: _________

Teacher’s Name & Course: ______________________________________

USCHOOL E-MAIL: __________________________________________

If this is a class assignment to be addressed (what?): _________________________________

Please check current your area of need (if there isn’t a specific assignment).

☐ Language Mechanics (such as)
  o Variety in sentences
  o Too many sentence fragments
  o Incorrect punctuation or capitalization (please specify which and type) _____________
  o Agreements of parts of speech

☐ Organization of Paper
  o Brainstorming Process
  o Using an outline
  o Writing a good thesis statement
  o Using transition words

☐ Content (i.e. Making sure to answer all parts of a writing prompt)
  o Use of literary elements/devices

Other…

☐ Editing

☐ Vocabulary

THIS REQUEST SHOULD BE DROPPED OFF TO JAMIE CRAWFORD IN ROOM #207 IN THE SONKEN BUILDING DURING SCHOOL HOURS AND AN APPOINTMENT WILL BE SCHEDULED.

☐ Completed        ☐ Needs additional session (s)       Comment: __________________________