## **Inclusive Access Order Form**

## section A: to be completed by department chair or faculty member **Faculty Name:** Date: **Email Address: Phone Extension:** Semester/Year: Section(s): Course: **Department: Anticipated Total Enrollment: Publisher Name: Textbook Title:** ISBN and Edition: **ISBN for Digital Title:** Section B: to be completed by Educational Affairs **Dept Dean Acknowledgment: Dept Chair Acknowledgment:** section C: to be completed by Bookstore Is IA Available?: Order Received On: **ISBN for Digital Title: Cost to CLC: Lowest Digital Price:** Verified: Date: Source: **Price to Students: ISBN for Printed Material: Price for Printed Material: Entered into Course Request:** Date: **Entered into IA Spreadsheet:**

Date: