

ELM LEARNING RESOURCES REQUEST

This form is to request the creation or modification of Learning Resources (examples of Learning Resources are facilities, rooms, material, and equipment) for addition to ELM. Please fill out another ELM Learning Resources Request if you would like to add more Learning Resources. The completed form must be submitted by the requesting Agency ELM Point of Contact. Please email ohiosharedservices@ohio.gov to submit this form. If you have any questions please contact Rusty Martin or Katherine Vanhooose

Note: If you have CRM 9.0 access, you may also create a CRM case with this form attached and assign it to the HCM-ELM provider group for Katherine Vanhooose or Rusty Martin.

** Asterisks indicate required fields for this form*

Facility

Facility details – **Please use the Facility drop down menu below to indicate if adding a New Facility or modifying an Existing Facility. If an existing Facility, enter the Description in the Facilities section of this form; if a New Facility, enter all the appropriate information below in the fields in the Facilities section.*

*Facility: Choose an item.

*Description:

(50 character max; description must be unique to equipment and room)

*Short Description:

(10 character max)

*Holiday Schedule: Choose an item.

Mail Drop Location:

Vendor:

Customer:

*Facility Address:

*Facility City:

*Facility State:

*Facility Zip Code:

Facility County:

*Facility Country:

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Adhoc Contact details

*Contact:

*Contact Type:

Choose an item.

Email Address:

Phone:

Learning Environment

1. Primary: Choose an item.

2. Primary: Choose an item.

3. Primary: Choose an item.

4. Primary: Choose an item.

5. Primary: Choose an item.

6. Primary: Choose an item.

If there are attachments for the facility (i.e. maps, parking, local restaurants, etc.) please indicate "Yes" below and include attachment(s) with the email submission of this form.

Attached File:

Choose an item.

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Room

Room Detail - **Please use the Room drop down menu below to indicate if modifying an Existing Room or adding a New Room. If an existing Room, enter the Room Type, Room Name, and Room Status in the following Room Detail section; if a new Room, please enter all the appropriate information in the fields in the following Room Detail section.*

*Room: Choose an item.

*Room Type: Choose an item.

*Room Number:

Room Name:

Building Name:

Floor Number:

Max Occupancy:

*Room Status: Choose an item.

*Accommodation: Choose an item.

If there are attachments for the room, please indicate "Yes" below and include attachment(s) with the email submission of this form.

Attached File: Choose an item.

Learning Environment

1.

Primary: Choose an item.

2.

Primary: Choose an item.

3.

Primary: Choose an item.

4.

Primary: Choose an item.

5.

Primary: Choose an item.

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Equipment

*** All Facility Equipment must be fixed equipment located within a room that does not need to be scheduled for use. ***

*Description:

(50 character max; description must be unique to equipment and room)

*Short Description:

(10 character max)

*Status:

Choose an item.

*Type:

Choose an item.

Asset Tag:

Serial Number:

Notes:

If there are attachments for the equipment (i.e. equipment manuals, instructions, etc.), please indicate "Yes" below and include the attachment(s) with the email submission of this form.

Equipment Attached File:

Choose an item.

Learning Environment

1.

Primary:

Choose an item.

2.

Primary:

Choose an item.

3.

Primary:

Choose an item.

4.

Primary:

Choose an item.

5.

Primary:

Choose an item.

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Material

*Description:

(50 character max; description must be unique to equipment and room)

*Material Type:

Choose an item.

*Effective Date:

[Click here to enter a date.](#)

*Status:

Choose an item.

*Short Description:

(10 character max)

Author:

Publisher:

Year Published:

ISBN:

Learning Environment

1.

Primary:

Choose an item.

2.

Primary:

Choose an item.

3.

Primary:

Choose an item.

4.

Primary:

Choose an item.

5.

Primary:

Choose an item.