

## Request A Meeting with a Librarian for Research Assistance

Please fill out this form and a librarian will contact you as soon as possible (usually within 24 hours), excluding holidays and semester breaks.

Submit the form to arcc.library@anokaramsey.edu.

First Name:	Last Name:	
Email:	Phone:	
Tech ID:		
To better serve y	you, please tell me a bit about your research ne	ed
1. What is your assign	nment, research paper or speech?	
Argument/Pers	suasive	
Informative		
Other		
2. What is your <b>topic</b>	? In one sentence, describe your thesis.	
3. If you've begun yo	our research, what specific <b>keywords</b> have you already used?	
4. How many <b>library</b>	resources are you required to use (books, articles, etc.)?	
5. What <b>citation</b> style	e is required for your list of works cited? (MLA, APA, etc.)?	
6. What <b>class</b> is this f	or?	
7. <b>Who</b> is your teached	er?	

8. Where have you looked for information already?