

LIBRARY COURSE RESERVE FORM

PHOTOCOPYING OF COPYRIGHT MATERIAL MUST BE IN COMPLIANCE WITH PUBLIC LAW #94-553, CONCERNING COPYRIGHTS

Instructor Name: _____ Date: _____

Phone/Ext: _____ Email: _____

Course Title: _____ Course #: _____

Title: _____

Author: _____

Date for Reserve Removal: _____

In order that we may serve you and your students more quickly and efficiently, please state exactly how you will tell your students to request this item _____

Personal Copy: Book _____ Article _____ Video _____
CD Rom _____ Other _____

*(Library is **NOT** responsible for loss of personal materials and cannot replace any loss.)*

CIRCULATION PERIOD:

_____ 2 Hour/Library Use Only _____ 24 Hour/Overnight

_____ 3 days _____ 7 days

Note (not required): _____