RESERVE REQUEST FORM

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Name of person taking item off Reserve

INSTRUCTIONS 1. Please fill in all information including complete Title and Author. 2 Library owned media materials may be placed on reserve in increments of 30 days. 3. Sign and date the bottom of the form. All items will be returned by Campus Mail after Spring Semester. □ Regular Reserve Only □ E-Reserv			Instructors Name * Libraries * Libraries * * Electron					
Approved	1	I	Ise the Title your students will ask for	Item	Library Assigned #	Barcode Library use		
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ON	ructors Signature		Date Received	Staff Taking	in Reserve	Staff Approving Use		

Staff taking item off Reserve

Date picked up

OFF.

Page 2 - please fill out information on Page 1 first

Approved	AUTHOR	TITLE (Use the Title Your Students Will Ask For)	ITEM	Library Assigned #	BARCODE (Library Use Only)		
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Notes							

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