

Bell Library Reserve Request Form

Instructor's Name		Phone Number	
E-mail Address		Office Address	
Course Number		Course Name	

When would you like the material taken off of reserve? <input type="checkbox"/> End of current semester <input type="checkbox"/> Will notify <input type="checkbox"/> Other:	Would you like the material returned to you upon removal? <input type="checkbox"/> Yes, return to my office <input type="checkbox"/> No, please recycle / Do not return	Media Requests Only: Do you want video uploaded to Media Site? <input type="checkbox"/> Yes <input type="checkbox"/> No
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Loan Period	<input type="checkbox"/> <u>3 Hour</u> Library Use Only	<input type="checkbox"/> <u>2 Day</u> May leave Library	<input type="checkbox"/> <u>7 Day</u> May leave Library
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Item Titles	Author	# Copies	Call #	Added Date / initials	Removed Date / initials

*Allow 7 days for processing of all reserve materials.
 Items will be considered donated to the library if they are not picked up or their return is not requested before the instructor departs from the university.
 Failure to provide all necessary information and items will result in cancellation of request.
 The Bell Library reserves the right to refuse any requests that involve a violation of copyright law.

Instructor's Signature _____ Date _____