

Library Use Only
 Received By: _____
 Date: _____
 Time: _____

All Information Must be Provided

SEMESTER _____ 20 _____

DEPARTMENT _____ COURSE No. _____ PO BOX _____ PHONE _____

INSTRUCTOR'S FULL NAME _____ EMAIL _____

❖ **Please note:** Course Reserves manager must have request at least **7 days** prior to date needed.

DATES ITEM(S) TO BE PLACED ON RESERVES: _____ to _____

Library Video/Audio Item Information

Library owned media items placed on Course Reserves are given 3 HRS not to leave library loan period

1.	Full Title, including subtitle:
Library Call Number:	
2.	Full Title, including subtitle:
Library Call Number:	
3.	Full Title, including subtitle:
Library Call Number:	
4.	Full Title, including subtitle:
Library Call Number:	
5.	Full Title, including subtitle:
Library Call Number:	

RESERVE REQUESTS ARE PROCESSED ON A FIRST COME/FIRST SERVE BASIS