RESERVE REQUEST FORM

- Please indicate exactly how you will tell the students to ask for the item, usually the way you cite it in your syllabus.
- Please allow three full class days for processing materials before you expect students to use the material.
- Items will be removed at the end of each semester unless otherwise indicated.
- *NOTE: The Call Number is needed only if you would like us to locate the book for you.

Instructor’s Name: ______________________________________________

Phone: ______________________________________________

Course (Ex. PHIL 101): ______________________________________________

Date: ______________________________________________

Semester: _______________________________________________

1. Item Title: _______________________________________________

   Author: _______________________________________________

   *Call Number: _______________________________________________

   Circle One: 2 HOURS (In library only) 4 HOURS (In library only)

       1 DAY  3 DAY  7 DAY  10 DAY

2. Item Title: _______________________________________________

   Author: _______________________________________________

   *Call Number: _______________________________________________

   Circle One: 2 HOURS (In library only) 4 HOURS (In library only)

       1 DAY  3 DAY  7 DAY  10 DAY

3. Item Title: _______________________________________________

   Author: _______________________________________________

   *Call Number: _______________________________________________

   Circle One: 2 HOURS (In library only) 4 HOURS (In library only)

       1 DAY  3 DAY  7 DAY  10 DAY

4. Item Title: _______________________________________________

   Author: _______________________________________________

   *Call Number: _______________________________________________

   Circle One: 2 HOURS (In library only) 4 HOURS (In library only)

       1 DAY  3 DAY  7 DAY  10 DAY