Please fill out and attach to items to be put on Reserve

Date: ____________  Term: ____________
Instructor: ____________________________
Department: ____________________ Phone: ____________
Course Schedule Number & Title: ____________

Loan Period: (check one)

_____ 1 hour
_____ 2 hours
_____ 4 hours
_____ 24 hours
_____ other: ____________________________________

Restrictions:

_____ In-Library Use Only
_____ Can be taken out of library

Date to be taken off reserve: ________________
__ Will pick-up
__ Return to: (College, Program, Bldg, Rm)

________________________________________________________________________

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