Reserve Request Form—Books

Time:

Name_____

Course_____ Section_____ # of students_____

Semester_____ Last date material needed_____

2 hr library use only____ 2hr Overnight____ Multiple day reserve_____ # of days____

(Items may be checked out
2 hrs before closing and are due
I hr after opening the next day)

4 hr library use only____ (DVD's or VHS' from Media Collection)

Author	Title	Call number	Date removed (office use only)