FLAXMAN LIBRARY **RESERVE REQUEST**

Faculty name: Today's date: Reserve requested for Semester/Year:

Course title: Department: Course number:

Reserve (circle one): BOOK PHOTOCOPIES AUDIO-CD AUDIO-CASSETTE VIDEO-CASSETTE DVD OTHER____________________

Photocopied articles & AV materials on reserve are "library use only." For **BOOKS** specify: ☐ **overnight loan** or ☐ **library use only**

Author/Title:

Flaxman Library call number (if applicable):

Print this form & fill out the portion above. Return to library with your reserve item.

Allow 1 week processing time.

TO BE FILLED OUT BY LIBRARY STAFF

Complete / On Reserve date: *Initials:*

Not owned: *On order date:*

Not available: *Reason / notes:*

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