



Course Reserves Request Form

Please allow two business days for material to be processed.

Please only place items on reserve that will be used by your students in the current semester.

Reserves will be removed at the end of the semester unless you inform the Library otherwise.

Date: _____

*Instructor Name (Title, First & Last): _____

*Course Name: _____

*Course Number: _____

Checkout period (check one): () 3 hours () 24 hours

* 3-hour reserves cannot leave the Library.

Does this course need to be cross-listed with another? If so, please provide the name and course number of the cross-listed course:

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Library Use Only:

Date Entered in FOLIO: _____

Processed By: _____