MEDIA RESERVE REQUEST FORM

FOR PERSONAL ITEMS, PLEASE COMPLETE THE BOTTOM SECTION OF THIS FORM

SEMESTER	**DATE**	**COURSE NUMBER**
INSTRUCTOR	**EXTENSION**	**EMAIL**

All items will be removed from Media Reserve one week after the end of the current semester.

Please allow a minimum of two business days for processing.

MEDIA RESERVE ITEMS DO NOT LEAVE THE LIBRARY AND HAVE A TWO HOUR CHECKOUT PERIOD

Formats: Books, VHS, DVD, Cassette, Records, CD, etc.

Format	Call Number	Composer/Performer	Title

WAIVER FOR PERSONAL ITEMS

I release Sims Memorial Library from any financial responsibility should my personal items be lost or damaged.

I realize that these items will be processed by the library staff for placement on reserve.

THIS WAIVER MUST BE SIGNED BY THE INSTRUCTOR BEFORE PERSONAL ITEMS ARE PLACED ON RESERVE

Format	Call Number	Composer/Performer	Title

INSTRUCTOR'S NAME (PLEASE PRINT)_____

INSTRUCTOR'S SIGNATURE_____**DATE**_____

NOTE Items will be circulated in accordance with Sims Memorial Library Circulation Policies.

**********_DATE INSTRUCTOR COLLECTED PERSONAL ITEMS_____INITIALS_____*

**********_DATE INSTRUCTOR REQUESTED ITEMS BE REMOVED FROM RESERVE_____*

**********_DATE ITEMS REMOVED FROM SYSTEM_____BY_____*