

RESERVE REQUEST FORM

Course name: _____

Instructor (last name, first name): _____ Course department and number: _____

Phone: _____ At which reserve location do you want this? _____

E-mail: _____ For which semester do you want this on reserve? _____

Academic Department: _____ Semester: _____ Year: _____

- Please list each item to be placed on reserve and record only one item per line.
- **For library owned items**, record the call number, author, and title; include the volume, issue, and date if applicable. Please list this information as it appears in the Libraries' catalog.
 - **For personal copies**, please list authors and titles.
 - **For new items to be purchased**, list complete author, title, publisher, and date of publication. For new items to be purchased, *is electronic format acceptable*, if available and cost effective? Please check your preference. **Yes** **No**
 - **Please designate a loan period for all items.**

Items that require Copyright Compliance cannot be placed in On-Site Reserve. **Copyright Information** is available from: <http://guides.lib.ku.edu/copyright>.

ITEM INFORMATION List Call Number, Personal Copy, or Purchase	AUTHOR/COMPOSER Last Name, First Name	TITLE	CHOOSE ONE 2HR-with overnight 2HR-no overnight 4HR-with overnight 4HR-no overnight 1 day 1 week 3 day 2 week	LIBRARY STAFF NOTES

**Save Reserve Request Form template to your desktop. Complete form and save again.
Print or email for delivery to appropriate reserve liaison.**

Revised 04/13/2016

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