

Course Reserves Form

Mercer University Medical Library and LRC

Contact: Stephen Ellis, Circulation Manager, 478-301-2541, ellis_sb@mercer.edu

A separate request form for each course is required. Please submit form and materials at least 5 business days before the first day of class.

Course number (REQUIRED): _____ Date Submitted: _____

Course name: _____ Circle semester: SPRING SUMMER FALL
Semester Year: 20 __ __

Instructor: _____ Department: _____

Telephone #: _____ Email Address: _____

Special Instructions: (*Default loan period is 4 hours*) _____

Faculty members who supply photocopied materials to be placed on temporary reserve are advised that it is their responsibility to obtain permission from the copyright holder. Sample permission letter and request forms are available at <http://medicine.mercer.edu/library/Library%20Services/reserve>.

Please submit completed form with copies of reserve articles and/or books to the Library Circulation Desk.

# of Copies	Title/Author	In-house library use only?		This column for Library Staff Use Only
		Yes	No	

*** Need more room to list items? See reverse for additional space ***

Library Staff Use Only:

Received by: Name: _____ Date: _____	Processed By: Name: _____ Date processed: _____
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