New Mexico Tech
L·I·B·R·A·R·Y

Circulation Department

Semester & Year _____

Course Reserve Request Form

Prof. Name _____ Phone _____ E-mail _____ Course # _____

Course Name _____ Circle One: 2HR 4HR 12HR/Overnight 2 Weeks

Important! Choose one of the following:

_____ Take items off Course Reserve at the end of current semester (personal copies will be returned to dept. secretary).

_____ Leave items on Course Reserve for an upcoming semester.

Please do not write below this line.

Barcode	Title	Call # (N/A if professor's copy)	Author	Loan Time	*Staff Initials*

Deleting Staff's Initials & Date _____

Returning Student's Initials & Date _____ Department Signature & Date _____