Camden-Carroll Library
Reserves Form for
PHOTOCOPIED, COPYRIGHTED ARTICLES FOR E-RESERVE

_____ Semester _____ (Year)

Instructor’s Name: __________________________________________________________

Course Name: ______________________________________________________________

Course Number: _____________________________________________________________

Department: ____________________ Campus Phone: _____________________________

Campus Address: ____________________________________________________________

E-Mail Address: _____________________________________________________________

Is this the first time that this item has been placed on reserve? ______ Yes ______ No

* * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * *

ITEM(S) TO BE PLACED ON RESERVE: (Additional materials can be listed on the back)

1) Author(s): __________________________ Title: ___________________________

2) Author(s): __________________________ Title: ___________________________

_________________________________________  __________________________
Signature (Required)  Date

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