

# University Library System Book Reserve List

Date: \_\_\_\_\_ Department: \_\_\_\_\_  
 Instructor: \_\_\_\_\_ For Materials to be Held at \_\_\_\_\_  
 E-Mail: \_\_\_\_\_ **Hillman Library** Course Name: \_\_\_\_\_  
 Campus Address: \_\_\_\_\_ Number of Students: \_\_\_\_\_  
 Campus Phone Number: \_\_\_\_\_ Materials to be used for the \_\_\_\_\_  
 Date Received: \_\_\_\_\_ 2 Hours 3 Days 7 Days  
 \_\_\_\_\_ Term

**Please Allow A Minimum of One Month For Processing**  
**\*\*Maximum of 60 items\*\***

Call Number	Author	Title	C H E C K H O L D I N G	R E C A L L	O R D E R	D A T E	R E S E R V E

