Shimberg Health Sciences Library University of South Florida

Please Print

Reserve Request Form

Date		Phone			Disc (library copy)			Book (library copy)		
Instructo	structor Course #			CD			I	-		
Email				DVD Disc (personal cop		Book (personal copy)				
Campus Address				CD	,, 					
May we install a small security strip in personal copies? Yes No				DVD						
Checkou t 2-hr. or 24-hr. or 48-hr. or 1 week	Call number (if applicable)	Author		Title			Date on Reserve	Date off Reserve		

THE LIBRARY IS NOT RESPONSIBLE FOR PERSONAL COPIES PUT ON RESERVE. DO NOT WRITE BELOW THIS LINE.							
Phoned	Mailed						