

DATE _____

**HOOLEY-BUNDSCHU LIBRARY
RESERVE PLACEMENT REQUEST**

INSTRUCTOR: _____ **CAMPUS ADDRESS:** _____

COURSE NUMBER: _____ **PHONE NUMBER:** _____

COURSE NAME: _____

ARE ITEMS TO BE POSTED ON THE ELECTRONIC RESERVE? (circle one) YES NO

ARE ITEMS FOR WEEKEND CLASS? (circle one) YES NO

IF YES, PLEASE SPECIFY CLASS DATES: _____

CHOOSE ONE OF THE FOLLOWING LOAN PERIODS FOR EACH ITEM:

Library Use Only

24-Hour Reserve

3-Day Reserve

7-Day Reserve

Article/ book	Author(s)	Title	Copies	Loan Period	Removal Date

**Please enter information exactly as it appears on the course syllabus.
Contact Farrukh Hasan at x3620 for further information *Thank you!***