

**PAUL & ROSEMARY TRIBLE LIBRARY
CHRISTOPHER NEWPORT UNIVERSITY
FACULTY RESERVE MATERIALS REQUEST**

IMPORTANT: This request must be turned in at the Reserve Desk at least **THREE** days before materials are to be placed on reserve.

Professor's Name: _____ Date: _____

CNU ID# _____ or SOCIAL SECURITY# _____

Course Name/Number: _____ Telephone: _____

Type of Reserve: _____ Regular _____ Electronic _____ Media

Item(s) should remain on reserve until (please check one):

- _____ End of Semester
 _____ Permanent Reserve
 _____ Other (please specify) _____

Check the reserve circulation period desired:

_____ Strict (2-hrs) _____ Media(4 hrs) _____ 1-Day _____ 2-Days _____ 5-Days _____ 7-Days _____ 14-Days
 (resa) (medrs) (resb) (resc) (resg) (resd) (rese)

At the end of the reserve period:

- _____ Please dispose of the copies.
 _____ Please hold for me to pick up at library.
 _____ Please send through campus mail.

For photocopied material, please read and sign:

I certify that the photocopied material hereby submitted for reserve at Christopher Newport University, Captain John Smith Library, meets the requirements of the copyright law (PL 94-5533, sec. 106-8) and I assume full responsibility.

 Professor's Signature

Fill in items to be placed on reserve as students will be requesting them:

AUTHOR	TITLE	BOOK, PHOTOCOPY, OR MEDIA
Rev: 8/06		

OFFICE USE ONLY

STAFF SIGNATURE

DATE

