LIBRARY RESERVE PROCESSING FORM

Please fill out the following form completely. Forms not filled out completely and correctly will not be accepted. Each individual material will need to be filled out in a separate section on this form.

Instructor's Name: _____ _____
Last Name, First Name.

CWID Number: _____ Department: _____

Office Room #: _____ E-Mail: _____@collin.edu

Campus Phone #: ___x_____ Estimated Enrollment: _____

Course Name: _____ Course #: _____
(ex. British Literature II) (ex. ENGL 2322)

Semester: ☐ Fall ☐ Winter ☐ Spring ☐ Maymester ☐ Sum1 ☐ Sum2 ☐ Sum3

I understand that it is the responsibility of the Collin College Faculty member submitting library reserve materials to assure that those materials are eligible for "reserve use" under U.S. Copyright Law and fair use guidelines. Reserve items are In Library Use Only.

Signature :_____ ***Date :***_____

Due to copyright restrictions, the Collin College Libraries will not accept materials with labels such as: **"Instructor Copy**," "**Desk Copy**," or "**Examination Copy**". Visual Media owned by the Library will be on reserve for a maximum period of two (2) weeks, with a checkout duration of two (2) hours. After a form has been submitted, please allow 3-5 business days processing time

Reserve Material Type: Library Owned Book: ☐ Book will be provided: ☐
(select one)
Library Owned Media: ☐ Media will be provided: ☐

Start Date:_____ End Date:_____

Title:_____

Author:_____

Edition:_____ Number of copies:_____

Checkout Period: (1 hr ☐ 2 hr ☐ 3hr ☐ 4hr ☐ other ☐ _____).

Copyright holder:_____

On End Date: Return to instructor ☐ in room number: _____ <OR> ☐ Donate to library

Library Staff Use:
Date received: _____
Approved/Rejected:
Receiving Staff Initials: _____
Date Processed: _____
Processed Staff Initial: _____

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(select one)
Library Owned Media: ☐ Media will be provided: ☐

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Title:_____

Author:_____

Edition:_____ Number of copies:_____

Checkout Period: (1 hr ☐ 2 hr ☐ 3hr ☐ 4hr ☐ other ☐ _____).

Copyright holder:_____

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Approved/Rejected:
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Processed Staff Initial: _____

Additional sections on next page

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Library Owned Media: ☐ Media will be provided: ☐

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Author:_____

Edition:_____ Number of copies:_____

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Processed Staff Initial: _____

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Library Owned Media: ☐ Media will be provided: ☐

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Author:_____

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Spring Creek Campus
2800 E. Spring Creek Pkwy
Plano, TX 75074
972-881-5860

Central Park Campus
2200 W. University Dr.
McKinney, TX 75070
972-548-6860

Preston Ridge Campus
9700 Wade Blvd.
Frisco, TX 75035
972-377-1560