Georgia Gwinnett College Library
Reserves Form

This completed form must accompany all materials to be placed on reserve.

Name __________________________________________  Semester Submitted ________________________________

E-mail Address __________________________________  Phone Number ________________________________

Course Name ____________________________________  Course Number ________________________________

Faculty Status (circle)  Full-Time  Adjunct  School Affiliation (circle)  GGC  GPC

Please check one:  
☐ I will retrieve or renew my reserve items at the end of the semester.
☐ Please return my reserve items to my campus mailbox at the end of the semester.
☐ These materials belong to GGC Library.

List all items to be placed on reserve on the back of this form. Please allow at least 5 business days for processing new materials.

Copyright

The copyright law of the United States (Title 17, U.S.C.) governs the making of photocopies or other reproductions of copyrighted material. I understand that unauthorized use of copyrighted materials is a violation of the law for which I may be liable.

I understand that by signing this form I am accepting full responsibility for any violations of copyright law that the reproduction of these reserve materials may entail.

__________________________________________________________  _______________________
Signature  Date

STAFF USE ONLY

Date added:  Added by:  Notified by:  Date renewed:  Renewed through:  Expires:


<table>
<thead>
<tr>
<th>Title</th>
<th>Traditional or electronic</th>
<th>Personal copy (y/n)</th>
<th>Number of copies</th>
<th>Loan Period</th>
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<tbody>
<tr>
<td></td>
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<td>2 hour*</td>
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<td></td>
<td>3 day</td>
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<td>1 week</td>
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* In-library use only