



# Hard Copy Reserve (Use this form to place NON-electronic items on reserve.)

Instructor\* \_\_\_\_\_ Department \_\_\_\_\_ Phone \_\_\_\_\_ AU Email \_\_\_\_\_

\*If the course needs to be cross-referenced, please indicate the name of each instructor.

Reserve requests are valid for the session marked. Course Name & Number \_\_\_\_\_

CHOOSE A TERM: (Full Academic YEAR  ) (FALL  ) (SPRING  ) (SUMMER Sessions: FULL  1st  2nd  3rd  )

Check out period for materials: 2 hour  1 Day  3 Day  7 Day

The materials that I am submitting for reserve abide by the Copyright Law of the United States, the Board of Regents of the University System of Georgia Guidelines, and the Augusta University Guidelines. The following websites provide more information concerning copyright: <http://www.usg.edu/copyright/> <http://www.copyright.gov/>.

Instructor signature \_\_\_\_\_

**Record the call numbers for library materials.**

Call Number	Author	Title	Status (For Office Use)

Submit materials and form at the circulation desk, or fill out, save and [email](#) this form and have any materials delivered. After we process your materials, we'll send a confirmation email to your Augusta University account.

**FOR OFFICE USE ONLY:** Date Received and Initials of Desk worker: \_\_\_\_\_ Date Posted: \_\_\_\_\_