University of Delaware Library

STUDENT REQUEST
TO SCHEDULE FILM AND VIDEO

To:  University of Delaware Library Film and Video Collection Scheduling
     (Fax: 831-6197)

From:  _____________________________________________________________
       Faculty/Teaching Assistant (Please Print)

       Phone: _________________________   E-mail: _______________________

Please arrange for the following enrolled University of Delaware student to schedule the Library video material described below in my name for class presentation:

Student Name: _________________________   Net I.D. # ___________________

(NOT SSN#)

The student will be responsible for its safe return by the due date.

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<th>Call Number</th>
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Use Date

Signature of Student _________________________ Date ____________

Signature of Faculty / Staff _________________________ Date ____________

Film and Video Staff _________________________ Date ____________

Film and Video Scheduling Office Hours are 8:00am - 5:00pm, Monday - Friday. For information or questions, call the Library at 831-8419.