

Student Reserve Authorization Form

The Reserve Room will accept student projects or other student works for print or electronic reserves only if the student author signs below acknowledging the following permissions:

Course (Dept. Code & #): _____

Semester/Year: _____

_____ has permission to place my paper on electronic reserves:
Professor's Name

<p>From ____/____/____ to ____/____/____</p> <p><i>Or (please circle one)</i></p> <p>Indefinitely</p>
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_____	_____ - _____ - _____
Print Student's Name	Phone #
_____	____/____/____
Student's Signature	Date

Professor's Phone #: _____

Professor's Email: _____