

Connelly Library

Faculty Proxy Borrower Registration

Please fill in the blanks below and print out the form. Once the printed copy is signed by both parties, bring it to the Head of Access Services in the Circulation Department at library for processing.

Faculty Information

Name: _____

Library Barcode Number (14 digits): _____

Department: _____

Campus Address: _____

Campus Phone: _____

Campus E-Mail: _____

Faculty's Signature: _____

By signing here, I agree to be responsible for materials borrowed in my name by the proxy borrower named below.

Proxy Borrower Information

Name: _____

Library Barcode Number (14 digits): _____

Address: _____

Phone: _____

E-Mail: _____

Proxy Borrower's Signature: _____