RYERSON UNIVERSITY LIBRARY & ARCHIVES

LIBRARY CARD & E-RESOURCES APPLICATION FORM

Instructions:

1 Please complete Sections 1 and 2 and choose the applicable category.

2. Return completed form to the Library Circulation Desk.

3. Please bring a Govt-issued photo ID and proof of address.

☐ Field Instructor ☐ Other _____ (Please Specify)

Section 1: Identification Information	
Surname *(please print)*	
First Name	Middle Initial:
Address: Street:	
City/Prov	Postal Code
Mobile Telephone No.	- -
Home Telephone No.	- -
Business Telephone No.	- - Ext.
Departmental Affiliation	
E-mail	

By signing below, I agree that library privileges will be used for research, academic or course development purpose.

_____ _____

Applicant's signature Date

Section 2: Authorization (must be completed by the School/Department Chair)

I am requesting that the Library extend borrowing privileges to the above applicant in the School /Department of _____ for the time period from _____ to _____ (up to one year).

Date *Date*

I understand that the School/Department's Office will be responsible for any outstanding library fines or penalties that may be incurred with this card.

NOTE: For access to library resources, please check applicable box(s) ☐ **Print Resources** ☐ **E-Resources**

Name *(please print)*: Surname:	
First Name:	
Signature:	Title:
Date:	

For Library Use ONLY		
Date Received:	Staff Initial:	Notes: