Patron Profile for Reading Room Access

Name: ____________________________________________________________

Institutional Affiliation: ____________________________________________

Student ID# or Driver’s License#: ____________________________________

How may we contact you?

Phone ____________________________

Email _____________________________

Mailing Address ____________________________

__________________________________

__________________________________

Research Purpose (Please check one)

_____ Class Assignment/ Instructional.  Instructor: ____________________________

              Course: ____________________________________________

_____ Personal Interest

_____ Academic  _____ Internal Query/AMK

_____ Community Interest  _____ Business Interest

You may provide any details you would like regarding your research interests: