University Libraries

GA/ Staff Proxy Library Registration Form

Professor's Information:	Name:			
	(last)	(first)	(initia	1)
	Department:	Campus	Mail Code:	_
	Campus Phone:	e-mail ad	e-mail address:	
GA/Professional/Classified S	itaff Name:			
	(last)	(first)	(initia	1)
GA/Professional/Classified S be present when a card is is	taff must sign it. (Unless prior	orrowed. The professor must complete r approval from Circulation Supervisor, e card will expire at the same time as the when checking out books.	ADS Department Head has b	een granted, the professor must
		UNLV Library Card Agreement		
incurred if the Library is require to the library. (3) I will notify faculty, and staff. (5) I unders UNLV University Libraries Comp of the Computer Use Guideline	ed to submit my account to a colle the library immediately if my car tand that I must have my library o puter Use Guidelines and I unders s may result in loss of access to the	Il fines for overdue materials, all fees assessection agency. (2) I will immediately report is lost or stolen. (4) I have received or card to access the computers and to check stand I must comply with the guidelines eachese services and/or suspension of all librarity in the UNLV Libraries may be revoged materials. (c) Unpaid fines or	rt any change of name, address, was offered a copy of the Library out or renew all library materials h time I log on to a library comp y use privileges. Unacceptable uked for reasons including but no	telephone number, or e-mail address y's Circulation Guidelines for students, i. (6) I have received a copy of the uter. (7) I understand that violation se that is also illegal may also result in
Professor's Signature:		_ _	Date:	
GA/Professional/Classified S	taff Signature:		Date:	