

Cooperating Raleigh Colleges (CRC)

Direct Library Loan Request

Date _____ Course _____ Instructor _____

Student Borrower _____ Student ID # _____

Email _____ Phone _____

Mailing Address _____ Institution _____

Certifying Library Official _____
(printed name) (signature)

Subject Area _____ Reference Service Needed Yes ___ No ___

Call #	Author	Title of Loaned Materials
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____

Lending Institution _____ Lender's initials _____ Date Due _____
(Original: Send to borrower's library when materials are checked out. Copy: Lending library keeps.)

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