Library Reserve Removal

One form is needed for each course. Please print.

**Course Information:**

Instructor: ________________________________________

Course Name: _____________________________________

Course number: ________________________________

Section: _______________________________________

**Option A:**
___ Please remove this course and all its readings from the Library Reserve Collection.
   ___ Return the books/photocopies to me, or ___ discard the books/photocopies.

**Option B:**
___ Please remove only the titles on the attached list from the Library Reserve Collection.
   ___ Return the books/photocopies to me, or ___ discard the books/photocopies.

**Option C:**
___ Please remove only the title listed below from the Library Reserve Collection.
   ___ Return the book/photocopy to me, or ___ discard the book/photocopy.

Title of item: ___________________________________________________

Signature: ___________________________          Date: ________________