Music & Arts Library Course Reserves Request Form
(Books, Scores, Audio/Video Recordings)

Instructor:_____ **Term:**_____
Course Title:_____
Course Number ***(required)***_____ **Email:**_____

Note: Allow *3 business days* for processing additions to your reserves list during the semester.
Initial semester reserve lists should be submitted *2 weeks* before the start of the semester.

Author/Composer	Title	Edition, Publisher, etc. (optional)	Call Number