

PROXY BORROWER APPLICATION

Please type or print clearly

Faculty Name: _____ Date _____

Department: _____

Phone: _____ E-Mail _____

I hereby authorize _____, SSN _____
to act as my Proxy Borrower at the University Libraries during
_____ semester.

I am aware that the Proxy Borrower will charge Library material(s) in my name and that the identity of the Proxy will not be recorded in the record(s) of the loan transactions. The material will be charged to me as though I had completed the transaction(s) myself.

Once charged to me, by the Proxy Borrower, the material becomes my responsibility and I am aware that the material is to be returned or renewed before it becomes overdue. I am responsible for paying all fines and fees that may result from the loan transactions.

I acknowledge that the Library owns the Proxy identification card and that I am responsible for returning the card to the Library when the Proxy is no longer authorized to act as my Proxy.

I understand that I may have up to 2 individuals simultaneously designated as a proxy for me. I am responsible for submitting one of these forms for each person authorized by me as a Proxy Borrower. I am responsible as detailed above for all material charged at any time using a proxy card bearing my name and identification number.

Faculty Signature: _____ Approved: _____
University Libraries/Circ. Staff/Initial)

