

UBC Faculty Authorization Library Card Application Form

Faculty member's contact information:

First name:	Last name:
Faculty member's barcode:	29424
Department:	
Email:	
Phone number:	
Authorization expires: <input type="checkbox"/> September 15 th , 2020	

I understand that the Faculty Authorization library card is a separate library account from my UBC Faculty library account. I understand that any material borrowed with this library card is my responsibility and that the use of the card is subject to the *UBC Library Loan Regulations*. I agree that if any item is lost or returned late the resulting fines or charges are my responsibility. I understand that my Faculty library privileges may be suspended if the Faculty Authorization library card is misused or if material is not returned by the due date when requested by another borrower. I understand that it is my responsibility to contact UBC Library if I wish to cancel a Faculty Authorization card.

I would like the authorized user of this library card to receive all email notifications regarding the account:
 Yes or No

Authorizing signature: _____

Date: _____

Authorized user's contact information:

First name:	Last name:
Email:	

Applications may be submitted in person to:

UBC Vancouver campus:

Walter C. Koerner library
Woodward Library
Biomedical Branch Library

UBC Okanagan campus:

UBCO library

Please provide one piece of government-issued, photo ID when applying for your Faculty Authorization library card.

