

Proxy Card Application

Faculty Information

Name: _____

Last, First, Middle Initial

Faculty I.D. #: _____

Payroll Title: _____

Department: _____

Campus Mailing Address: _____

Email: _____

Telephone: _____

Library Barcode Number:

2210600 _ _ _ _ _

Proxy Expiration Date:

1 year

6/30/___

fall winter spring summer I summer II

1/4/___ 3/31/___ 6/30/___ 7/31/___ 9/30/___

To renew proxies, please download a renewal form:

http://library.ucsc.edu/services/circ/circ_proxy_renew.pdf

Faculty Information

I authorize the person listed on this form to withdraw library materials in my name. I will be responsible for return of materials, recall notices, and replacement bills, fines/fees, or lost books on this account.

Faculty Signature: _____

NOTE: Signature constitutes agreement to abide by UCSC library policies.

Proxy Borrower Information

Name: _____

Last, First, Middle Initial

Signature constitutes agreement to abide by UCSC library policies.

Proxy Signature:

Privacy Note: please be aware that all items checked out on this card will be viewable by the faculty sponsor. The proxy card is intended for faculty checkout, not personal checkout.

Library Staff Only

Proxy Library Barcode Number:

2210600 _ _ _ _ _

Entered by: _____

Date: / /

Checked by: _____

Date: / /