



### Reserve Form

No.	Course code	Course Title	Section No.	Book Title	Item Barcode	To be used in the library	To be checked out	Reserve Period	
								From	To
1									
2									
3									
4									

Faculty ID	Faculty Name	College	Department

Faculty Signature: ..... Circulation staff Signature: ..... Director of the library Signature: .....

<b>Library Use:</b> Received Request Date: ..... Staff Signature: ..... Date: .....
Remarks: .....
Send to: Circulation section    E-mail: <a href="mailto:fatima_baitsaid@du.edu.om">fatima_baitsaid@du.edu.om</a> or E-mail: <a href="mailto:aalmallam@du.edu.om">aalmallam@du.edu.om</a>