ICU Library Lending Service Request Form for ICU Students

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Please fill out the boxed area with bold lines.  太字枠を記入してください。 | | | | | | **Date申し込みの日付：**  Please enter the date… | | |
| **ID No.**  **学籍番号** | |  | | **Name**  **氏名** |  | | | |
| **Address**  **送付先住所** | | **Postal Code:**  〒 | | **Phone 電話番号:** | | | **E-mail:** | |
| **Address：** | | | | **Preferred Delivery Time**  **希望到着時刻:**  Choose Time Zone... | | |
| ・You can borrow up to five books per request, three times in total during term.5冊\*3回/学期ごと  ・Check the OPAC in advance to see if the books are on the shelves. 所蔵の有無を確認してください。  ・The "On loan" books cannot be sent out. 「貸出中」の図書は郵送できません。  ・Magazines, large books and other special materials cannot be sent out. 禁帯出資料は郵送できません。 | | | | | | | | |
|  | Title / Volume  図書のタイトル/巻号 | | Author  著者 | | Call No.  請求記号 | Location  所在 | | Barcode No.  登録番号 |
| 1 |  | |  | |  |  | |  |
| 2 |  | |  | |  |  | |  |
| 3 |  | |  | |  |  | |  |
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| Special Period for Graduate thesis(For only 4th grade student)  論文用長期貸出を希望(学部4年生のみ) |  |

**▼図書館スタッフ記入欄 (For the Library Use)**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **受付番号** |  | | **受付メール**  **受信日時** | | /  : | | **発送日** | | / | | **返却期限**  **DueDate** | | / | | |
| **発送伝票**  **番号** |  |  |  |  | **-** |  |  |  |  | **-** |  |  |  |  |
| **備考** |  | | | | | | | | | | | | | | |