

VILLA JULIE COLLEGE LIBRARY

VIDEO REQUEST FORM

Date of request: _____

Requested by _____

Department/Program _____

TITLE: _____

(Include copyright date; Attach flyer or catalog to Video Request Form if possible)

Publisher/Distributor: _____

Subject of Video: _____

Have you read a review of this video? Have you seen it? Has it been recommended by an organization or a colleague? (please explain)

Reason for Request: Please name the course or courses that this video will support and when they will be taught. Is this video for classroom use, to be put on reserve, or suggested for circulating collection?

LIBRARY USE ONLY

Cost of video: _____

Library action: () Approved () Not Approved

Date: _____

12/98
Revised 06/05