

**Instructions:**

- 1 Please complete Sections 1 and 2 and choose the applicable category.
2. Return completed form to the Library Circulation Desk.
3. Please bring Ryerson One Card and proof of address.

Visiting Scholar / Fellow

RA/TA

Other \_\_\_\_\_ ( Please Specify)

<b>Section 1: Identification Information</b>	
Surname <i>(please print)</i>	
First Name	Middle Initial:
Address: Street:	
City/Prov.	Postal Code
Mobile Telephone No.	- -
Home Telephone No.	- -
Business Telephone No.	- - Ext.
Departmental Affiliation	
E-mail	

By signing below, I agree that library privileges will be used for research, academic or course development purposes.

Applicant's Signature \_\_\_\_\_

Date \_\_\_\_\_

<b>Section 2: Authorization</b> (must be completed by the Chair/Director of the School/Department)	
I am requesting that the Library extend borrowing privileges to the above applicant in the School /Department of _____ for the time period from _____ to _____ (up to one year). <small style="display: block; margin-left: 20px;">Date Date</small>	
I understand that the School/Department's Office will be responsible for any outstanding library fines or penalties that may be incurred with this card.	
<b>* NOTE: For online access to library e-resources/my. ryerson set-up, please contact CCS or email <a href="mailto:help@ryerson.ca">help@ryerson.ca</a></b>	
Name <i>(please print)</i> : Surname:	
First Name:	
Signature:	Title:
Date:	

For Library Use ONLY		
Date Received:	Staff Initial:	Notes: