

Running Start Book Loan Request Form

Fall Winter Spring 20__ Name: _____ CTC#: _____ - _____ - _____	Date: _____ Phone: _____ Cell: _____ Mailing Address: _____ City: _____ ST: _____ Zip: _____
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Textbooks Requested

Code	Course/Sec#	Instructor	Books Needed	Out	In
EXAMPLE: 3477	ENGL&101A	Sweetingham			
			Office Use Only		

Signature: _____ Date: _____

Please note: By signing this form you agree to return books in **acceptable condition** by **the last day of finals**. If you do not return the books on time there is a **\$10 late fee for each book** that is returned after the last day of finals. If books are not returned at all then there will be an obligation placed on your account for the **cost of the books plus the late fee**.

All Book Loan requests are due by the last day of finals and no late requests will be accepted.