One-Time Class Visit Request
Clements Library

Class Title ___________________________ Class Number _______ Number of Students ______

Date 1 __________ Date 2 __________ Date 3 __________ TIME ______________________
(Please submit three dates that you would prefer, with Date 1 being the most preferred)

Department ___________________________ Instructor ___________________________

Address ________________________________ Telephone ___________________________

E-mail _________________________________ Fax _________________________________

Specific Space Requested
Main Room __________ Reading Room __________ Other __________

**Permission to use the Clements Library is completely at the Director’s discretion**

User’s must agree to observe the following conditions
*Inform all students of Library rules, and ensure that students adhere to these rules.
*Instructors using the building are responsible for the conduct of their students

PLEASE NOTE THAT THIS FORM MUST BE COMPLETE & FORMALLY APPROVED
BEFORE WE CAN ASSIST YOU WITH THE CLASS
WE REQUIRE A MINIMUM 2-WEEK ADVANCE NOTICE

OVER

I agree to observe the conditions listed above.

Signature of Instructor __________________________ Date __________

Approved by Director __________________________ Date __________
J. Kevin Graffagnino, Director

Remarks/Special Requests
______________________________
______________________________

Please return the signed agreement to: Clements Library, University of Michigan, 909 S. University Ave.,
Ann Arbor, MI 48109-1190
fax (734) 647-0716 telephone (734) 764-2347

First Contact at Clements Library __________________________

Clements Library staff member(s) who will be responsible for class __________________________
What exactly do you want to accomplish with your visit?


Do you expect that there will be follow-up use of Library materials? If so, what sort?

**PRE-ARRANGEMENTS FOR FOLLOW-UP USE MUST BE MADE IN ADVANCE WITH LIBRARY STAFF**


**PLEASE SEND ANY ADDITIONAL MATERIALS THAT WOULD BE HELPFUL**

(i.e., class syllabus, class description, group mission)