

# REQUEST FORM FOR JOURNAL SUBSCRIPTIONS, SBU LIBRARY

For library use:

Request rcvd: \_\_\_\_\_

Fund code \_\_\_\_\_

In requests? \_\_\_\_\_ If so, for  
which campus? \_\_\_\_\_

On order? \_\_\_\_\_ If so, for  
which campus? \_\_\_\_\_

EBSCO # \_\_\_\_\_

In SWAN ? \_\_\_\_\_

OCLC # \_\_\_\_\_

Bib # \_\_\_\_\_

Order # \_\_\_\_\_

Notes: \_\_\_\_\_

Suppressed \_\_\_\_\_

Unsuppressed \_\_\_\_\_

Requestor: \_\_\_\_\_

Dept \_\_\_\_\_ Course# \_\_\_\_\_ Your email or phone (optional): \_\_\_\_\_

Next semester course will be taught: \_\_\_\_\_ Circle campus(es) BOL MV SPR Salem

TITLE \_\_\_\_\_

ISSN \_\_\_\_\_ Cost \_\_\_\_\_

Back Volumes/Issues needed, if any \_\_\_\_\_

Indexed In \_\_\_\_\_

Full Text In \_\_\_\_\_

NOTE:

MESSAGE TO REQUESTOR: *Thank you for your request!*

\_\_\_\_ LIBRARY OWNS \_\_\_\_\_ Item now READY FOR USE

CALL NUMBER: \_\_\_\_\_

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