

STUDENT PAPER / PROJECT / DISSERTATION PERMISSION FORM

Submit completed form and your paper, project or dissertation.

Student Last Name		Stude	Student First Name			Date
Student G#		Stude Cell #:	nt Phone Num	nber Other #	t :	
Academic Term:	☐ Fall	□ Sp	ring		Sumi	ner
Reserve Location:	☐ Fairfax: Fen	wick Library 🔲 A	rlington: Arling	ton Campus Library	☐ Sci-T	ech: Mercer Library
FOR COURSE RESERVE USE – COMPLETE THIS SECTION – PRINT CLEARLY						
Instructor Name						
Course Number			Cours	e Section		
Course Name						
Paper/Project Title						
FOR DISSERTATION PRE-DEFENSE USE - COMPLETE THIS SECTION – PRINT CLEARLY						
Dissertation Title						
Dissertations are held until the end of the specified academic term. If your defense is rescheduled, email the specific campus with DISSERTATION in						
the subject line. (Arlington: aclres@gmu.edu; Fairfax: ereserve@gmu.edu; Sci-Tech: pwlres@gmu.edu)						
STUDENT PERMISSION						
☐ I authorize						
They may place my paper/project/dissertation on reserve for the academic term indicated above.						
Student Signature					D	ate
Library Staff Only						
Date/Time R	leceived	Desk Staff Initial	S	Processed Date		Reserve Staff Initials