

Book Purchase Request Form

Application No. _____

Book Name			Application Date:
Author Name Editor Name			<所蔵> 無し・有り 所蔵部局名・資料番号
Series Name			
Publisher			
ISBN			<購入可否> 可・否
Publication Year	Price		<購入否理由>
Library User ID	Student Number		
Affiliation			
<i>Furigana</i>			
Name			発注No.
Contact (Telephone and e-mail) Enter both	Telephone No. : - - University-issued e-mail address: @ms.saitama-u.ac.jp		備考
Contact Method Circle (O) one	Telephone	E-mail	Notice

◆ Notes when completing the form

- ★ Please fill in the section within **the bold lines** on the application above, and either send it to us via e-mail or bring a printed copy to the library counter.
- ★ If you are sending your application via e-mail, please put “Book Purchase Request” in the subject line.
- ★ Send it to libs@gr.saitama-u.ac.jp.
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