

COLLECTION DEVELOPMENT REQUEST

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TO BE COMPLETED BY REQUESTOR:			
Date of Request:			
Campus Recommendation: O Bainbridge O Cairo O Moultrie – Industrial Drive			
O Moultrie – Veterans Parkway O Tho	omasville O Tifton		
Name:			
Department:			
E-mail address: Pho	ne:		
Student ID Number:			

REQUESTED MATERIAL:		
Format of Title Requested:		
Book:	O Print O Audio CD	
Periodical:	O Print O Online	
Media:	O DVD O Music CD O Other:	
Database:	O General O Special Subject:	
Author:		
Title:		
Publisher:		Date of Publication:
Edition:	Volume:	Date needed by:
Number (ISBN, ISSN, other):		

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