Request for Student Extension of WSU Libraries Borrowing Privileges
For enrolled students not registered for the current term

Date: __________________________________________________

Student Name: ___________________________________________

Student Access ID:________________________________________

Student Telephone #: ______________________________________

Please allow the above student to have full student borrowing privileges for the semester indicated below. The student is not currently registered for classes with Wayne State University, but I attest to the student’s need to utilize the libraries for the current semester. I further attest that the student was enrolled in the previous semester.*

Spring/Summer      Fall      Winter      Year: __________

____________________________________    _________________   ___________
Faculty/advisor signature           Department              Phone

____________________________________    ____________________________
Faculty/advisor name (print)                     E-mail address

*Please note: an extension in borrowing privileges will only be granted if the student has been enrolled in the previous semester, and is expected to be enrolled in the next semester.

Library use only

Student Library Card Number:   29343____________________________________
New Expiration Date: ________________________
Staff member initials: __________