

# UBC Faculty Authorization Library Card Application Form

## Faculty member's contact information:

First name:	Last name:
UBCcard barcode number: 29424	
UBC Employee ID:	CWL:
Department:	
Campus: UBCV <input type="checkbox"/> UBCO <input type="checkbox"/>	
Email:	
Phone number:	
Authorization expires: <input type="checkbox"/> September 15 <sup>th</sup> , 2025	

I understand that the Faculty Authorization library card is a separate library account from my UBC Faculty library account. I understand that any material borrowed with this library card is my responsibility and that the use of the card is subject to the *UBC Library Loan Regulations*. I agree that if any item is lost or returned late the resulting fines or charges are my responsibility. I understand that my Faculty library privileges may be suspended if the Faculty Authorization library card is misused or if material is not returned by the due date when requested by another borrower. I understand that it is my responsibility to contact UBC Library if I wish to cancel a Faculty Authorization card.

I would like the authorized user of this library card to receive all email notifications regarding the account:

Yes or  No

The authorized user of this account is currently a UBC student, staff or faculty member:

Yes or  No

The authorized user of this account requires the following library privileges:

Borrowing physical library books

Accessing library eResources

Authorizing signature: \_\_\_\_\_

Date: \_\_\_\_\_

## Authorized user's contact information:

First name:	Last name:
Email:	

Applications may be submitted by email:

Complete the application form and submit by email as a PDF for processing:

[library.accounts@ubc.ca](mailto:library.accounts@ubc.ca)

