

FACULTY NAME		Proxy Name	
FACULTY PRIMARY ID		Proxy e-Mail	
FACULTY E-MAIL		Proxy Department	
<p>FACULTY: I authorize the above-named proxy to borrow, in my name, library materials which are needed to conduct my UC Davis research. I accept full responsibility for all materials borrowed on this library proxy card, including the timely return of all materials, and prompt response to all recall and overdue notices and replacement bills. The above-named proxy is employed by UC Davis or is a current UC Davis student.</p> <p>(signature) _____</p>		<p>Proxy Payroll Title</p> <p>FACULTY: I agree to follow all library rules, to promptly pay all charges for overdue, lost, and damaged materials, and to give immediate notice of any change of address or loss of library card. I understand I must immediately notify the library of any proxies no longer authorized to borrow on my behalf.</p> <p>(initials) _____</p>	

LIBRARY USE ONLY

Issued by		Date		Accounts connected	<input type="checkbox"/>	N/W 2nd Revision Complete	<input type="checkbox"/>
------------------	--	-------------	--	---------------------------	--------------------------	----------------------------------	--------------------------