

TCU Sponsored Borrowing Privileges Application

Borrower Information

Name: _____
Please Print (First Name) (M.I.) (Last Name)

TCU ID# _____

Affiliate / Associate
Status 36 / Status 35

Home Address: _____
Street Apt. #

_____ City State Zip Code

Email: _____ @ _____ Phone: () - _____

Sponsor Information

Name: _____
Please Print (First Name) (M.I.) (Last Name)

TCU ID# _____

Department _____ TCU Box: _____

Email: _____ @ _____ Phone: () - _____

Sponsoring (department/individual) assumes full responsibility for the return of borrowed items, payments of any fines or service charges, and replacement of lost or damaged items. Please retain a copy of this form for your files and request *TCU Library Clearance Form* from Library Administration when the borrower separates from TCU.

Signature: _____ Date: _____

Staff Only