



Atlanta University Center Robert W. Woodruff Library

Clark Atlanta University • Interdenominational Theological Center • Morehouse College • Spelman College

APPLICATION FOR CARREL ASSIGNMENT

Student Faculty Institution: _____

FEE: Rental \$10.00/Per Semester Key Deposit: \$5.00/Refundable (One Time)
Payment Method: Check, Money Order, Debit/Credit Card

NAME _____ Date _____

LOCAL ADDRESS _____ / _____ / _____
Street City/State Zip Code

TELEPHONE _____ / _____ / _____
Local Business E-Mail Address

INSTITUTION WITH WHICH AFFILIATED _____
DEPARTMENT _____ POSITION _____

PURPOSE FOR CARREL _____
SUBJECT OF RESEARCH _____

EXPECTED COMPLETION DATE OF RESEARCH (Month & Year)
December _____, _____ May _____, _____ July _____, _____

Signature Date

I recommend the approval of this application for a study carrel assignment for the purpose stated above.

Department Chair or Academic Dean Date

LIBRARY USE ONLY
 Approved Carrel Number _____ Rental Dates: _____ / _____
From To
 Not Approved
Renewals _____
