

DISCARD AUTHORIZATION FORM

UNIVERSITY BOOKSTORE • INSTRUCTIONAL RESOURCE RENTAL DEPARTMENT • 836-3125

DEPARTMENT _____ COURSE NUMBER _____
TITLE _____
AUTHOR _____
VOLUME/EDITION _____ COPYRIGHT DATE _____
ISBN NUMBER _____

DEPARTMENT COPIES

Does your department wish to receive any copies of this discarded resource?

- Yes — give us _____ copies of the discarded resource.
- No, we don't want any copies of the discarded resource.

NOTE: The IRR Department does not place copies of discarded resources on reserve at the library. If you wish copies placed there, request that copies be discarded to your department, and follow the standard procedure for placing resources on reserve.

COMMENTS:

DEPARTMENT APPROVAL

Permission is granted to discard the above rental resource. If the resource is used by more than one instructor, the signature of the department chair signifies approval of each instructor.

SIGNATURE OF INSTRUCTOR DATE

SIGNATURE OF DEPARTMENT CHAIR DATE



UNIVERSITY of WISCONSIN
EAU CLAIRE

DISCARD APPROVED BY

SIGNATURE OF IRR DEPT MANAGER DATE

TITLE NUMBER _____

QUANTITY IN INVENTORY _____

VALUE ONE _____

VALUE TWO _____

VALUE THREE _____

- Sold on floor.

PRICE PER COPY _____

QUANTITY _____

- Discarded to academic department.

QUANTITY _____

DEPT CONTACTED _____ DATE _____

IRR STAFF INITIAL

SIGNATURE OF ACADEMIC DEPARTMENT RECIPIENT DATE

- Sold to vendor.

VENDOR _____

DATE _____

QUANTITY _____

INVOICE NO. _____

OFF CRT _____

QUANTITY

IRR STAFF INITIAL

DISCARD DATE _____

- AUDIT TRAIL ATTACHED

OFFICE USE ONLY