

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

Carrel #: \_\_\_\_\_  
(leave blank)

## Study Carrel Request Form

### NAME

(LAST): \_\_\_\_\_ (FIRST): \_\_\_\_\_

Cajun Card #: \_\_\_\_\_ ULL EMAIL: \_\_\_\_\_

DEPARTMENT: \_\_\_\_\_ PRSNL EMAIL: \_\_\_\_\_

**\*\*Make sure this address is active\*\***

### HOME MAILING ADDRESS (for emergency purposes only.)

STREET: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

### STATUS

FACULTY: \_\_\_\_\_ GRADUATE STUDENT: \_\_\_\_\_ EXPECTED GRADUATION DATE: \_\_\_\_\_

I have received a copy of the rules and regulations regarding the use of study carrels at Dupré Library, and I agree to abide by their conditions. I understand that if I violate these rules or fail to comply with the reasonable requests of Dupré Library's administration, faculty or staff my carrel privileges may be revoked.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

### *For Departmental Use:*

Date Assigned: \_\_\_\_\_ Issued By: \_\_\_\_\_

Valid through: \_\_\_\_\_

Renewed: \_\_\_\_\_ 2<sup>nd</sup> Renewal: \_\_\_\_\_ 3<sup>rd</sup> Renewal: \_\_\_\_\_

4<sup>th</sup> Renewal: \_\_\_\_\_ 5<sup>th</sup> Renewal: \_\_\_\_\_ 6<sup>th</sup> Renewal: \_\_\_\_\_

7<sup>th</sup> Renewal: \_\_\_\_\_ 8<sup>th</sup> Renewal: \_\_\_\_\_ 9<sup>th</sup> Renewal: \_\_\_\_\_