



LIBRARY ACQUISITION FORM

NO.	TITLE	AUTHOR	ED. / YR	PUBLISHER	ISBN NO.	QUANTITY				UNIT PRICE	TYPE OF MATERIALS <small>(BK, CD, CASSETTE, VIDEO)</small>	LIBRARY REMARK
						RS	OS	TR	RO			

REQUESTED BY _____
(BLOCK LETTERS)

SCHOOL / OFFICE _____ EXT _____

REQUESTED FOR SUBJECT _____

REMARK _____

SIGNATURE _____ DATE _____

VERIFIED BY HEAD OF SCHOOL / HEAD OF DEPARTMENT

NAME _____

COMMENTS (if necessary) _____

SIGNATURE _____

DATE _____

APPROVED / NOT APPROVED

ACADEMIC DEAN

COMMENTS (if necessary) _____

DATE _____

RECEIVED BY _____

PURCHASED BY _____

- NOTE:**
- A. RS – RED SPOT, OS – OPEN SHELF, TR – TEACHER REFERENCE, RO – REFERENCE ONLY.
 - B. DURATION OF DELIVERY: LOCAL 1 - 2 WEEKS, SPORE 2 - 3 WEEKS, OVERSEAS 3 - 4 MONTHS.
 - C. THOSE WHO WISH TO OBTAIN SUPPLEMENT PACKAGE, PLEASE PROVIDE THE TITLE OF THE TEXT BOOK THAT YOU ARE USING.