

**University of Management and Technology**

**Sialkot Campus**

**Learning Resource Center**

**Book Request Form**

* This form should be used to recommended book(s) that you wish the library to purchase
* Kindly provide as much information as possible e.g. author/editor, publisher, year, edition etc.
* Use another form if you have more title(s) to request.

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|  | **Sr.** |  |  | **Title** | **Author/Editor** |  | **Publisher** |  | **Edition** | | | **Year** | **Qty.** | |
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| **For Office Use Only**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | | | | | | | | | | | | | | | | | | | |
| **Availability of Books:** | | | | | | | | | | | | | | | | | | | | |  | |
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| Recommendation by Director Campus | | | | | | | | | | | | | | | | | | | | | |  |
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| **Approved by Director Campus** | | | | | | | | |  | |  |  |  |  | | |  |  | | **Date** | | | |
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| **Signatures:** | |  | | | | | | |  | **Date:** | | | | |  | | | | | | | |