**School or college student application to use the University of Sussex Library:**

**Reference only membership for the duration of your course (please complete in block capitals)**

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| ***General Information:***  Title:  Forename(s):  Surname: | **For UOS staff use only:**  BNO:  Expiration date: |

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| ***Contact Information:*** |
| Email: |
| Address: |
| Postcode: |
| Telephone number: |

|  |  |
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| *I have submitted a* ***digital photo*** *to* ***library.membership@sussex.ac.uk*** *(please tick)* |  |

***Declaration***

*I have read and understood the conditions under which I may use the University of Sussex Library and agree to abide by the Library regulations.* *Membership of the University Library is at the discretion of the Librarian who may refuse or withdraw membership at any time.*

Signature Date \_\_\_\_\_\_\_\_\_\_

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| --- |
| **For UOS staff use only:**  Staff Initials \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_ |

*Please return by email including digital photo of applicant to: library.membership@sussex.ac.uk*

*or hand in the validated form at the Reception Desk on arrival at University of Sussex Library*

***To be completed and validated by a member of staff at the above student’s school or college. The named staff member endorses the student’s use of the University of Sussex library until course completion date.***

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| Name of school/college |  | |
| Student’s course completion date |  | |
| Name of staff member and position |  | |
| Please stamp and date in this box | | Staff signature |