APPLICATION FOR LONG-TERM USE OF EMERITUS COLLEGE STUDY

Name of member: ______________________________    Date ____________________

Period study requested: from _____________________  until ______________________

Estimated average number of usage hours per day _________  Days: (circle) M  T  W  TH  F

Preferred time of day: AM ______  PM _______

Purpose of study use:

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Approved for study #_________ for _______ hours per day on  M  T  W  TH  F

For the period _________________ to _________________________

__________________________________________
Dean of the Emeritus College

__________________________
Date