Yale University Library Proxy Borrowing Agreement

Faculty Last Name: ________________________________
Faculty First name: ________________________________  Middle Initial: ___
Email Address: ________________________________
I authorize __________________________________________, to act as my proxy borrower within the Yale University Library system.
State date: __________________________  End date: __________________________

*Please note: only Yale University Faculty are eligible (exceptions can be made for anyone with a valid Yale ID who has disabilities)
*Faculty may only have up to two proxy assistants at a time for a maximum of 1 year

My signature below authorizes the person named above to serve as my proxy to borrow materials from the Yale University Library and to courier those materials to and from my office or other location for my use. I understand that the proxy card is used only to take out materials directly authorized by me for my research and/or classroom use. It is not intended for the proxy’s personal use. I understand that once my proxy has checked items out of the library, the materials are my responsibility and appear on my library account, exactly as if I had checked them out myself. I assume financial responsibility for replacement of Library materials lost, stolen or damaged library materials charged to my account by my proxy and any fines incurred due to late return.

Signature: __________________________________________
Date: __________________________

Scan and email this completed form to askyale@gmail.com

Questions? Contact the Sterling Memorial Library service desk at (203) 432-1775 or email askyale@gmail.com

For office use only:

Proxy Barcode: __________________________
Date processed: __________________________
Initials: __________________________