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Term   SUMMER 2016   Est. Enrol_____   Professor____________________  E-mail____________________

Department _____  Course # ___________  Office Phone_____________  Fax Number _____________

Section ____  Continuation Class (Y/N)____  Dept. Contact _____________  Home Phone _____________

Please fill in the information below.

BOOK NUMBER  AUTHOR  TITLE  PUBLISHER  EDITION  ISBN  REQ'D or REC

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If you will be using more than 5 titles, please use multiple forms.

Will you be using any of these titles again? (Y/N)  If so, what book number(s) and Term?

The Yale Bookstore can only process desk copy requests for courses with an enrollment of 40 or greater. Publishers may process all other requests, however direct faculty contact is required.

If this class has an estimated enrollment of 40 or greater will you need Desk Copies? (Y/N)_____  How many? _________

Are there any special supplies your students will need or anything else we need to know about this course?

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