

University of Minnesota Libraries-Twin Cities  
**Application for Borrowing Privileges**  
U of M Unregistered Graduates  
(Who are not registered through the Graduate School)

Library Card No. :	_____
Date Expires :	_____
Created By: _____	Date Created: _____

This form may be used to certify the status of graduate students who are engaged in thesis or dissertation research, but who are not registered for classes, and need to maintain library borrowing privileges and access to electronic databases.

Note: If you register through the Graduate School, you must use the Zero Credit Registration option instead. See the Graduate School for more details:

[http://www.grad.umn.edu/current\\_students/registration/grad\\_999.html](http://www.grad.umn.edu/current_students/registration/grad_999.html)

The University of Minnesota Libraries requires the completion of this application in compliance with the following:

- Legally binding license agreements, which mandate that remote database access be limited to currently registered students.
- Graduate School policy, which states that students must be registered every Fall and Spring term to maintain active student status.

<b>To the Student</b>	
Fill in the following information about yourself and have your professor sign and date the next section. Please bring completed form to the address listed at the bottom.	
Name:	_____
	(Last) (First) (M.I.)
Student ID#:	_____ Library ID# 2 _____
	(Barcode or U card Library #)
U of M E-mail Address:	_____ @ _____
Mailing Address:	_____
	Phone #: _____

<b>To the Advisor, Department Chair, or Director of Graduate Studies</b>	
I certify that the student named above is a graduate student in good standing and making satisfactory progress towards a major and degree. This student will be continuing to work on a thesis or dissertation through the semester listed below. This certification will be used only for granting of library privileges and access to library databases.	
Select just one: Fall _____ Spring _____ Summer _____ <i>(Spring semester certification will provide library privileges through the summer session)</i>	
Name (printed): _____	Title: _____
Signature: _____	Date: _____
Campus Address: _____	
Campus Phone #: _____	

**Return completed application to:** Borrowing Privileges and Fines, 110 Wilson Library, 309 19<sup>th</sup> Avenue South, Minneapolis, Minnesota 55455, or Fax to 612-626-8968. Questions may be directed to the Borrowing Privileges and Fines at 612-624-3383.