

Book Recommendation Form

This form may be used by the Academic Staff only

Date: _____

Name: _____

Department: _____

Course: _____

Main usage of text: _____ (e.g. Teaching, Research, etc.)

If teaching, is this title on a student **Reading List**? Yes _____ No _____

If included in a reading list, is it a **Textbook** _____ or **Reference** _____

If you want to reserve the text, please give the **Course Code** _____

Number of Students _____ and **Level** _____

Book details

ISBN: _____

Author(s)/Editor(s):

Title:

Publisher:

Date published: _____

Edition: _____

How many copies (if more than 1): _____

For Library use only

Bookstore:	
Hardcopy/Paperback edition:	
Price:	