

BORROWER PRIVILEGE APPLICATION

East Carolina University Libraries

Library Staff Use:

User ID: _____

Verification Date: _____

This is an application for patrons desiring borrower privileges from Laupus, Joyner and the Music Library. Qualified applicants are members of AHEC affiliates, Vidant Health employees, Friends of Laupus Library or Alumni Association members, UNC system students and employees, affiliated community college students and employees, and any NC resident of 18 years of age or older and able to pay a \$35 fee. All borrowers must present valid identification for their institution (e.g. University ID or NC driver license). Once issued, borrowers must present their library card with a valid photo identification card that adequately identifies them in order to borrow any materials.

Patrons applying for borrower privileges must agree to the following statements:

- I will notify Laupus Library Circulation immediately if the card is lost or stolen and if there is any change in address or contact information. Do not discard your library card when it expires, it can be renewed. If lost, a new card will be issued upon renewal.
- I will be responsible for all items borrowed on this account and will return items by the date due. I assume responsibility for items until they are checked-in at the service desk, including items returned in the book drops. This includes returning material promptly if recalled by Laupus Library. Overdue fines accumulate for most materials at a rate of \$0.25 per book per day. For items that are lost or damaged, the borrower will be charged the cost of replacing the item and a \$30.00 processing fee.
- I agree to promptly pay fines and/or fees assessed for overdue, lost, or damaged items borrowed with this card. I understand unpaid library bills may result in the suspension of borrowing privileges and may also be forwarded to the Attorney General of North Carolina, other state government agencies, and commercial collection agencies for appropriate legal action.
- I will provide a valid driver's license or state identification card for billing purposes as stated in ECU Library Circulation policies and procedures. I understand my driver's license number is authorized to be used only for the collection of bills for overdue, lost, or damaged library material.
- I will provide information on this application that may be used for identification and library debt collection if necessary. This information will be factual and accurate. I understand that this documentation will be maintained in a secure place and properly destroyed according to ECU guidelines. (Note: Failure to provide the requested Driver's License number may result in library checkout privileges being denied). **Military Exception:** A patron with only a Military ID card can register along with other verification of residency. This includes their Military Orders, utility or telephone bill, or check with their name and local address printed on it.
- Area residents who are of at least 18 years in age may purchase a library card at a cost of \$35.00 per year. Area residents are limited to only five items being checked out at any given time and must provide a NC Driver License at checkout.
- Non-ECU affiliates may not authorize others to borrow materials on their account.

Library Use Only

<input type="checkbox"/> Retired ECU Faculty & Faculty Emeriti	<input type="checkbox"/> Retired ECU staff	<input type="checkbox"/> ECU Family	<input type="checkbox"/> ECU Alumni
<input type="checkbox"/> Temp ECU Affiliate/Visitor Department: _____	<input type="checkbox"/> Vidant Medical Employee	<input type="checkbox"/> North Carolina Area Resident (\$35)	<input type="checkbox"/> Friend of Laupus Library
<input type="checkbox"/> Cooperative Borrower Institution: _____	<input type="checkbox"/> Visiting Scholar Institution: _____ _____	<input type="checkbox"/> Area Educator Institution: _____ _____	<input type="checkbox"/> Other: _____ _____
<input type="radio"/> Student <input type="radio"/> Faculty <input type="radio"/> Staff	Address: _____	_____	_____

Please print clearly:

Name _____
Last First Middle

Home Address _____

City/State _____ Zip _____

Phone: (Work) _____ (Home) _____ (Cell) _____

REQUIRED: Email Address _____

REQUIRED: Driver's License Number _____ State _____

Name of Institution _____

Institution Address _____

City/State _____ Zip _____

Did you previously attend ECU? If so, please fill out the information used for your ECU account.

Name _____
Last First Middle

Address _____ City/State _____

Zip _____ Email Address _____

Telephone _____ **Banner Number** _____

I have read, understand, and agree to these terms:

Applicant Signature: _____

Date: _____

Staff Name: _____

Date: _____