

REQUEST FOR ALTERNATIVE TEXT FORMAT

Students requesting text in an alternative format or desk copy must have a documented disability on file with the Learning Support and Disability Services Department. **Please attach copies of ALL receipts for books.**

Name: _____

Circle One: On Campus Off Campus Cell Phone #: _____

Course name you need text for: _____

Course #: _____ Instructor: _____

Book title: _____ Edition: _____

Author: _____

Publisher: _____

ISBN: _____ Have you purchased a copy of the book: YES NO

Price paid for you textbook: _____ Where purchased: _____

Course name you need text for: _____

Course #: _____ Instructor: _____

Book title: _____ Editiion: _____

Author: _____

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ISBN: _____ Have you purchased a copy of the book: YES NO

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