



# University Libraries

## UNIVERSITY OF GEORGIA

### Responsibility Voucher for Dependents

**Dependents with UGACards should bring this completed form, signed by the sponsoring UGA affiliated person to the Main, Science, Curriculum Materials or Music Library to have library borrowing privileges assigned.**

Dependents of currently employed faculty and staff and currently enrolled students at the University of Georgia are permitted to borrow materials from the Main, Science, Curriculum Materials and Music Libraries. The Libraries notify dependents of any and all obligations incurred. However final responsibility for these obligations is assumed by the sponsoring faculty, staff or student, agreed to by the signature below. Dependent borrowing privileges are based on the continuing employment of the UGA faculty/staff member or the current enrollment of the UGA student. Library card expiration dates for dependents are set according to established Library protocol: limit of 1 year for a faculty/staff dependent and the end of the current semester for a student dependent. Borrowing privileges may be renewed as appropriate with submission of a new form. Termination of a dependent relationship will also terminate these borrowing privileges. If borrowing privileges are requested, please complete the following:

Please allow the following UGA dependent to charge out materials from the Main, Science, Curriculum Materials and Music Libraries. I understand that, if necessary, the Libraries will make a reasonable attempt to retrieve any materials borrowed by this dependent. However, I assume responsibility for any overdue fines, replacement charges, processing charges and damage fees assigned by the Libraries for all library materials not cleared from the dependent's name by the appropriate library. Also, I understand that in order to request borrowing privileges for my dependent, my own library records must be clear of all obligations.

Dependent's Name:

Address:

City:  State:  Zip Code:

E-mail address:  Telephone number:

Sponsor's Name:

Department/Building:

City:  State:  Zip Code:

E-mail address:  Telephone number:

Sponsor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

#### FOR OFFICE USE ONLY

Dependent's Barcode Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

UGA Sponsor's Barcode Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Sponsor's Patron Group (Select One)

Faculty  Staff  Student

\_\_\_\_\_  
Date/Initials