

University of the Arts London
Library Registration Form – Staff Members

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User surname (staff use only)

Please complete in **BLOCK CAPITALS**

Title:
First name(s):
Surname/Family name:
Job title:
Course/Department:
College:
Line Manager's full name: Line Manager's email address: <small>(Please note: we will email your Line Manager to confirm your contract)</small>

Contract: Permanent Temporary (Contract end date: _____)

Address:
Postcode:
Tel no.:
Email:

Card number (on the front of ID card): 633692...
Barcode number (on the reverse of ID card): 1234...

We provide extended loans for users who are disabled or dyslexic – does this apply to you?

YES NO

Signing this Library Registration Form is proof of your agreement to abide by the [Library Services Code of Conduct](#)

Signature: _____ **Date:** _____

To be filled in by library staff:

User already on system? YES NO

User group (circle one): **Staff** **Temporary Staff** **Staff ISA**

Expiry date on Koha: _____

Record added by: _____ **Date:** _____