

Journals Library Recommendation Form

(Please pass this on to your librarian)

To: Librarian/Library Acquisitions Committee

From: _____

Position _____

Department _____

(optional) Email or Phone _____

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ISSN: _____

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_____ REFERENCE

I will refer to this journal frequently for new research articles related to my work.

_____ STUDENT REFERENCE

I will refer my students to this journal regularly to assist their studies.

_____ TO BENEFIT LIBRARY COLLECTION

My assessment of this journal's content and direction is very high. Its acquisition will fulfill department, faculty and student needs.

_____ AFFILIATION

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_____ OTHER _____

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