

Library Donation Form

Date _____

*(Please circle name of appropriate Librarian)

***To: Wilmington University Library Acquisitions
Pam Shukitt (Pamela.A.Shukitt@WilmU.edu)**

***To: Wilmington University Library Archives
Adrienne Johnson (Adrienne.M.Johnson@WilmU.edu)**

(Please complete the form and send it with the donated items to the library)

1. The following are donated to the Library:

Total # of Books _____

Total # of Others (CD-Roms, AV, Archival Material, etc.)

2. The following are provided to the library for the faculty AV collection:

Total # of Items and University Department (CD-Roms, AV, etc.)

3. I would like the library to:

Acknowledge receipt of the materials: **Yes** **No.**

Others: _____

**I understand that the Library may choose to not add the materials to the library collection.
I also understand that the Library has the right to apply standard processing to items
accepted and dispose items not required.**

Donor's information:

Name: _____ Organization: _____

Address: _____

Contact Tel. #: _____ E-mail address: _____

Date: _____ Signature: _____