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University of Kansas School of Medicine - Wichita  
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3. Items available to put on reserve: Personal copies of books, library books, reprints of articles, and journal issues.
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**Instructor:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
**Department:** \_\_\_\_\_ **Telephone:** \_\_\_\_\_  
**Course name:** \_\_\_\_\_ **Number of students enrolled:** \_\_\_\_\_  
**Course number:** \_\_\_\_\_ **Semester to be used:** \_\_\_\_\_  
**Effective date:** \_\_\_\_\_ **Take off reserve (date):** \_\_\_\_\_  
**Checkout Period: 2hrs In- library use** **Do you want photocopies returned to you?**  
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