




# Copy Center Request Form

Phone: 745-9739 x4 • Fax: 907-745-9711

Email: [msc.copy.center@alaska.edu](mailto:msc.copy.center@alaska.edu)

**Please allow 3 days turnaround time.**

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| Step 1 Job Information:                                                                    |                                                               |                                                                                                |                                                                                                   |                                                                                                         |
|--------------------------------------------------------------------------------------------|---------------------------------------------------------------|------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|
| Title or type of Original:                                                                 |                                                               | <input type="checkbox"/> Confidential                                                          | Date Submitted:                                                                                   |                                                                                                         |
| Original Consists of _____ pgs<br>(Count both sides of a 2-sided document)                 | Sets of Copies:                                               |                                                                                                | Date Needed:                                                                                      |                                                                                                         |
|                                                                                            |                                                               |                                                                                                | Time Needed:                                                                                      |                                                                                                         |
| Step 2 Job Finishing and Special Instructions:                                             |                                                               |                                                                                                |                                                                                                   |                                                                                                         |
| Black & White                                                                              | Color                                                         | Colored Paper<br>(Specify color)                                                               | Large-Scale printing<br>(please specify size)<br>24" max height or width                          | Laminate                                                                                                |
| 2-sided                                                                                    | 1-sided<br><i>Reason Required in<br/>Special Instructions</i> | 3-hole punch                                                                                   | Binding                                                                                           | Scan                                                                                                    |
| Single left staple                                                                         | Single right staple                                           | <br>Bi-Fold | <br>Tri-Fold | <br>Booklet Format |
| <b>Special Instructions:</b> NOTE: other services available--please inquire at 745-9739 x4 |                                                               |                                                                                                |                                                                                                   |                                                                                                         |
|                                                                                            |                                                               |                                                                                                |                                                                                                   |                                                                                                         |
| Step 3 Customer Information:                                                               |                                                               |                                                                                                |                                                                                                   |                                                                                                         |
| Name:                                                                                      |                                                               | Department:                                                                                    |                                                                                                   |                                                                                                         |
| Course (Subj/Course #/Section):                                                            |                                                               | Number of students enrolled:                                                                   |                                                                                                   |                                                                                                         |
| Signature:                                                                                 |                                                               | Contact Number:                                                                                |                                                                                                   |                                                                                                         |

| Copy Center Use Only |      |       |
|----------------------|------|-------|
| Fund:                | Org: | Acct: |
| Total Copies:        |      |       |