Labette Community College
EXTENDED HOUR LIBRARY APPLICATION

Complete Form

Return form to M100 or computersupport@labette.edu

Application will be reviewed

Once approved, you will be notified via email to pick up your card. Please bring your Student ID and one other form of identification.

STUDENT CONTACT INFORMATION

		STATUS	MAJOR
Student ID Number			
Student Name		☐ Full Time Student	
Phone		☐ Part Time Student	
E-mail			
Address City, State ZIP Code		☐ Day ☐ Evening ☐ Online	
Application Year and Term			

AGREEMENT

1. Extended hours are only available to Faculty, Staff, and currently enrolled Degree Seeking Students.
2. Library premises (both inside and outside) are monitored and recorded.
3. Library Resources are to be used for coursework only during the extended access times.
4. ALL Library Resources are NOT to be removed from the Library.
5. Any reports of misconduct will be investigated, and could result in disciplinary action including, but not limited to, suspension of Library access rights or expulsion from Labette Community College.
6. I understand that I must report a lost or stolen access card to the LCC Library immediately.
7. I understand that I am responsible for replacing a lost or stolen card, which includes a new application and fee.
8. By submitting this application, I agree to adhere with all Labette Community College Computer Use and Conduct Rules.
9. I understand that extended Library usage is a privilege, and should be treated as such. I understand that all actions and activities are recorded. I also understand that access is for the applicant only. Allowing others access with my account will result in disciplinary action.
10. Extended Access is only granted per Term. A new application will need to be completed each semester.
11. LCC Issued Student ID Card must be on my person at all times while using extended access hours in the Library.
12. Study groups are encouraged, and outside food is allowed. Abuse of this privilege could result in termination of your extended access account.

SIGNATURES

Signature	
Name	
Student ID Number	
Date	