

# LIBRARY DATABASES OFF-CAMPUS ACCESS REQUEST

Upon receipt of this completed form, your access will be activated for the time period requested.

**Return this form to:** Library Administrative Offices, 2060 HALL, Provo, Utah 84602  
or scan and email to [electronic\\_resources@byu.edu](mailto:electronic_resources@byu.edu)

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Net ID: \_\_\_\_\_ Retirement Date: \_\_\_\_\_

Reason for requested access: \_\_\_\_\_

Length of time requested:  1 year  2 years  3 years  4 years  5 years (max)

Terms of Use: Library databases may only be used for educational, non-commercial purposes. More details at <https://lib.byu.edu/databases/license-terms/>

I affirm that I will abide by the terms of use and only use my access to the BYU Library databases for activities directly related to research affiliated with the University.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## DEPARTMENT CHAIR

I affirm that the aforementioned retired faculty member is actively engaged in university research and requires off-campus access to library databases.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Department

## DEAN

I affirm that the aforementioned retired faculty member is actively engaged in university research and requires off-campus access to library databases.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
College