

Alternative Textbook Request Form Name: _____ Semester (Check one): □Spring □Summer □ Fall Year: UAH Email:_____ Fill out a form each course that that you are requesting Alternative Text: Course # and Course Name: Instructor: section Text Title: Publisher: Author: Edition: Location purchased: ISBN: Date purchased: Price paid: I understand that an electronic copy of a text is a personal copy, and that it is a copyright violation to sell or reproduce the electronic text. I understand that I must purchase a paper copy of the text in order to request and potentially receive an electronic copy. I acknowledge that Disability Support Services may not edit or revise alternative format texts received from publishers. I have read and understand the above statements and assume full responsibility for any materials I may receive and the conditions of this agreement. Signature of Student Date Signed FOR DSS USE ONLY Date requested from publisher: _____ Date received from publisher: _____

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Date student notified: Date student received:

Additional notes:

Staff Initials