Ball State University Libraries

A destination for research, learning, and friends

Note:

For Libra	ary Use	e Only	
Approved/Not approved			
Date		_BL	
Semester			_ 20
Scholar Carrel Assignments	1 4	2	3 6

Request for Use of Faculty/Graduate Student Carrel

I.	Name			(MI)	BSU ID		
	(Last)		(First)		BSU		
	Local Address						@bsu.edu
		(City)	(State)	(Zip)	Local Phone		
	Department _		ase)				
		(No acronyms ple	ase)				
II.	Carrel Request						
	1. New Applica	ant? Yes	No If no, lis	t previous schola	ar carrel roor	n number BL _	
	2. Semester for	r which a carre	l is being requested	l Fall	Spring	Summer	20
	3. Do you have	e an office on c	ampus? Yes	No Private or	Shared V	Where is it locate	ed?
	4. Computers as	re available for	use in the scholar	carrels.			
	*See attached	d list for compi	ıter specifications				
т		J	1 3				
ll.	Status						
	1 st - Doctoral Car	ndidate: E	dD/PhD Dissertation	on (course 799) G	raduate Fello	OW (Doctoral candidate	EdD/PhD
2	2 nd - Faculty:	Vi	siting Tenured	Tenured-Tra	ck Conti	ract Emeritu	s
3	3 rd - Masters Can	didate: Gi	raduate Fellow (Mast	ers candidate) MA	MS (Thesis)	MA/MS	
ertif	ication of Graduate	Status to Reque	st a Scholar Carrel b	pelow must be com	pleted and sig	gned by the Gradu	ate School, WQ 100
For C	Office Use Only						
	Certi	fication of	Graduate Sta	itus to Requ	iest a Sch	olar Carrel	
App	olicant is a full-time	graduate/doctor	al student and has re	gistered for one of	the following	; :	
	Doctoral Diss	sertation (DISS 79	9)	Gradu	ate Fellow (Ma	asters Candidate)	
_	Graduate Fell	OW (Doctoral Cand		Maste	rs Thesis or C	reative Project (69	
	Doctoral (Othe	er)		Maste: MA/M		aper or Creative P	roject (697)

An	nswer each of the following questions:
1.	What is the nature of your research project?
2.	What kind of work do you intend to produce?
3.	What kind of library materials do you intend to use? (Be specific)
4.	What is the expected duration of this project?
5.	For faculty and doctoral candidates The number of soundproof carrels is limited.
	Will you use a tape recorder or similar equipment that will disturb others? Yes No If yes, explain.
	If yes, explain.
	I have read the Regulations for the Use of Scholar Carrels and will abide by them.
	Signature Date

Sign, date and return this completed application to Secretary to Library Assistant Deans, Assistant Deans' Office, University Libraries, BL 014.

Note: Graduate students must take this application to the Graduate School, WQ100, for certification before returning it to the library.

University Libraries