

**Text Request Form**

Date of request: \_\_\_\_\_ Name of requestor: \_\_\_\_\_

Course(s) text would be utilized for: \_\_\_\_\_

Name of text: \_\_\_\_\_ Edition: \_\_\_\_\_

Anticipated publication date of next edition: \_\_\_\_\_ (If unknown, just state unknown)

Electronic or Paper Source: \_\_\_\_\_ Approximate cost: \_\_\_\_\_

Justification of request

Text is not available in AccessPharmacy

Comparable text is not available in AccessPharmacy

Please provide brief justification for why this text is needed over other text available through AccessPharmacy or through open access:

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Approved by PEC Date of approval: \_\_\_\_\_

PEC response if not approved:

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