

## **Boatwright Library Locker Request Form**

Status: Faculty/Student

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

UR ID #: \_\_\_\_\_

UR Box Number: \_\_\_\_\_

UR email: \_\_\_\_\_

Semester: \_\_\_\_\_

I acknowledge that I have read and understand the Boatwright Library Locker Policy document.

Thank you for your request. Please come by the Administration Office at the Boatwright Library to verify your UR status. If you have any questions, please contact Bianca Spurlock in the Administration Office at [bs3rh@richmond.edu](mailto:bs3rh@richmond.edu) for other options.