DEPARTMENTAL LETTERHEAD

Reader Registration

Access and Information Services

Robarts Library

130 St. George Street

Toronto, Ont.

M5S 1A5

To Whom It May Concern,

Please issue a UTORid and photo library card to (first name, last name), a (Visiting Professor, Visiting Scholar, Research Assistant, Fellow, Contractor) in this department.

(First name) will require privileges for the period ending (date of end of appointment). His/her date of birth is (date of birth).

If you need any further information, please contact (contact name and email).

Sincerely,

Name, title, e-mail, phone #