

# MWCC Request for Textbook E-file

(Adaptive Computer Lab)

**Student Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Student ID:** \_\_\_\_\_

**e-mail:** \_\_\_\_\_

**Instructor's Name:** \_\_\_\_\_

**Course:** \_\_\_\_\_ **Semester:** \_\_\_\_\_ **Year:** \_\_\_\_\_

<b>Book Information</b>	
Title:	
Author:	Edition: Book Publisher:
ISBN#:	Textbook Purchase Date:
Textbook Price(\$):	Bookstore:

## Verification Agreement

I verify and agree that:

- The requesting school or disabled student has purchased the above named printed work.
- The student is registered to take or attend the above course requiring the use of the book.
- The student has a disability that prevents him/her from using the book.
- The request is made or supported by the Coordinator of Disability Services

\_\_\_\_\_  
*(Signature of Disability provider)*

- The book has been determined to be essential to the student's successful completion of the course.
- The student and the school will not use or further distribute or copy the electronic files for the book for any other purpose.

I understand that any electronic text that may be supplied to me is solely for my own educational purposes. I will not copy or distribute any such electronic text in violation of the Copyright Revisions Act of 1976, as amended (17 U.S.C. Sec. 101 et seq.).

\_\_\_\_\_  
*Student Signature*

\_\_\_\_\_  
*Date*