Request for Variance of the Intra-Minerva Request Policy:

_____ requests a variance from

(name of library)

the Minerva Executive Board from the Intra-Minerva Request Policy.

_____   Date: _____

(Signature of Director)

****

1.   What items does this variance request cover?

_____

2.   Why are you requesting this variance?

_____

_____

3.   Is this a temporary variance? If so, for how long is it needed?

_____

_____

___Approved   ___Denied (see attached)

_____
Minerva Representative Signature   Date:_____