**Academic Accessibility**

~Alternative Textbook Request~

**Student Name:**

**Semester textbook needed:**

\*We must have a copy of the receipt for each book requested in an alternative format.

Please give or email a copy of the receipt to Academic Accessibility OR [academicaccessibility@asbury.edu](mailto:academicaccessibility@asbury.edu)

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| --- | --- |
| Course Number/ Section: | Course Professor: |
| Title of Book: | Author: |
| Publisher: | Edition: |
| Copyright Date: | ISBN# (use ISBN-13 if provided): |

**Office Use Only:**

ATN:  Received

BS:  Assigned to Student

Publisher:  Email to Student

Notes: