Textbook Requisition for Fall 2017

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Dept.:  Course:  Section Number(s):  Instructor’s Name:  Instructor’s Phone:  Instructor’s Email: |  | |  |  | | --- | --- | | Return By: Tuesday, March 28, 2017 |  | | Return By Mail: Luther Book Shop  Or Email: JoAnn Uhlenhake at [uhlejo01@luther.edu](mailto:uhlejo01@luther.edu)  Anticipated enrollment:  *Check appropriate box(s)*  First 7 Week Course  Second 7 Week Course  Check if course/titles continue through Spring semester |  | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Author | Title | ISBN | Edition / Copyright | Publisher | Status |
|  |  |  |  |  | Require  Optional  Choose One |
|  |  |  |  |  | Require  Optional  Choose One |
|  |  |  |  |  | Require  Optional  Choose One |
|  |  |  |  |  | Require  Optional  Choose One |
|  |  |  |  |  | Require  Optional  Choose One |
|  |  |  |  |  | Require  Optional  Choose One |
|  |  |  |  |  | Require  Optional  Choose One |
|  |  |  |  |  | Require  Optional  Choose One |

     