Division of Library Services  
Membership Application

Personal Details *(Please use block letters)*

Surname: __________________________ Given Names: _____________________ Title: __________

Previous CSU staff or student? YES/NO  CSU ID (if known): ____________________
Renewing your membership? YES/NO  Birth date (for PIN) _____/_____/_____ (dd/mm/yy)

Address Details

Postal Address ____________________________________________________________ Postcode __________

Email Address __________________________________________________________

Telephone: Home _____________ Mobile _____________ Business _____________

Joining Campus: □ Albury-Wodonga □ Bathurst □ Dubbo □ Orange □ Port Macquarie □ Wagga Wagga

Name of Institution

School/University/TAFE __________________________________________________________

□ University Undergraduate □ Alumni □ School Teacher (VIC teacher currently employed in any capacity at any VIC school)

□ University Higher Degree □ Workplace Learning Supervisor* □ School Teacher (NSW teacher currently employed in any capacity at any NSW school)

□ TAFE □ School Student (senior) □ Community Member

□ Staff (TAFE/University)

I hereby verify that the following person is a current supervisor of CSU students and is entitled to Library Membership.

_________________________________________  __________________________
*Signature of Head of School or Workplace Learning Placement Officer  Date

Declaration

I undertake to abide by the Conditions of Use of the CSU Card and borrowing as per the Charles Sturt University Library Rule.

I declare that the information I have provided is accurate and that I have not been excluded from using my home library or any of the other libraries. CSU may terminate my registration immediately should any of the information I have provided be inaccurate or I am in breach of the terms and conditions of borrowing.

I understand that CSU Library may check my registration details with my school/home library at any time and that CSU Library may send details of overdue material or monies owed at CSU to my school/home library.

Signature __________________________  Date __________________________

Personal information provided to the Library is protected by the Privacy and Personal Information Protection Act 1998 (NSW). Your information will only be used to provide library services to you including mechanisms for recording and payment of any outstanding debts in relation to overdue or lost items and not for any other purpose unless you give us permission to use it for another purpose.

You have a right of access to, and correction of, your personal information in accordance with the privacy legislation and CSU’s Privacy Management Plan.

Please direct any enquiries to CSU Library Coordinator, Flexible Delivery & Partnerships. Telephone: (02) 6338 6159.

Form submission

• Email to: libloans@csu.edu.au or bring in to the Library
**LIBRARY OFFICE USE ONLY**

<table>
<thead>
<tr>
<th>Category</th>
<th>Banner Code</th>
<th>Fee</th>
<th>Expiry Date (expires next year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>University Undergraduate</td>
<td>LSUUG</td>
<td>Nil</td>
<td>28/02/_________</td>
</tr>
<tr>
<td>University Higher Degree/Staff</td>
<td>LSUPG</td>
<td>Nil</td>
<td>28/02/_________</td>
</tr>
<tr>
<td>TAFE</td>
<td>LSRTO</td>
<td>Nil</td>
<td>28/02/_________</td>
</tr>
<tr>
<td>School Student</td>
<td>LSSBN</td>
<td>Nil</td>
<td>30/11/_________</td>
</tr>
<tr>
<td>Community</td>
<td>LSCBN</td>
<td>Nil</td>
<td>28/02/_________</td>
</tr>
<tr>
<td>Workplace Learning Supervisor</td>
<td>CASNL</td>
<td></td>
<td><strong><em><strong>/</strong></em>/</strong>_______ (expires 6 months)</td>
</tr>
<tr>
<td>(with Library)</td>
<td>CASNA</td>
<td></td>
<td><strong><em><strong>/</strong></em>/</strong>_______ (expires 6 months)</td>
</tr>
<tr>
<td>(with databases)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Identification sighted by (staff Initial) __________________________ Date __________________________

☐ Senior Students – Schedule 1 from school agreement
☐ Teachers – Confirmation of Employment
☐ Institution ID ☐ Photo ID ☐ Other __________________________

---

**FINANCE OFFICE USE ONLY**

Banner ID Number: __________________________
Barcode Number: __________________________
Banner Record created (Initial & Date) __________

**STUDENT CENTRAL OFFICE USE ONLY**

Talisma Interaction Number: ________________
Card issued date: __________________________
Patron contacted to collect card:_______ N/A__

12/2016