Application for Graduate Study Carrel Privileges
University of Nebraska at Omaha, Library

Name: ____________________________ Date: ____________________________

NU ID number: ____________________________

Address: ____________________________

Phone number: ____________________________

Email address*: ____________________________

Requested Carrel Number: ____________________________

* Email must be a valid unomaha.edu address

Categories for qualification: (In order of priority) (Circle your status)

1. PhD candidates
2. Masters students
3. Honors Students
4. Other – please specify ____________________________

I have received and read the Graduate Study Carrel Policy

Name: ____________________________________________

Date: ____________________________________________

I verify that this student is my advisee and a graduate or honors student in good standing

Name: ____________________________________________

Title: ____________________________________________

Campus Telephone: ____________________________

Date: ____________________________________________