

Welder Library

Thesis Binding Order Form

DATE _____

PT _____ NURSING _____ OT _____ EDUCATION _____ KINESIOLOGY _____

Student Name: _____

Address: _____

Phone: (____) _____

E-mail: _____

Preceptor: OT _____

- 1. Number of bound copies for student _____
- 2. Bound copy for Preceptor _____
- 3. Bound copies for the library 2
Students pay for 2 library copies
- 4. Total number of bound copies _____
Add line 1, 2 and 3

Binding fee @ \$25.00/copy = _____

Binding fee may be paid by cash or check only. Make checks payable to the "University of Mary"

Student copies will be mailed by the University of Mary to the address provided by student