



THE UNIVERSITY  
OF QUEENSLAND  
AUSTRALIA

**LIBRARY**  
*We link people with information*

**Contact your Hospital Library**

Herston - P: 3365 5353; F: 3365 5243

Princess Alexandra - P: 3176 2571; F: 3176 5222

Mater - P: 3163 1689; F: 3163 8710

Other UQ libraries - [www.library.uq.edu.au/](http://www.library.uq.edu.au/)

**Request to Amend Library Record**  
**ABN 63 942 912 684**

Please read Notes below before completing this form. Fill out sections required, print and sign the form.

Date

Title (*Mr, Mrs, Ms, Dr, etc.*)

Last Name

First Name and other initials

Student or staff number (UQ students or staff to complete)

Library number (other clients to complete)

Details of requested amendment (including reasons):

Signature \_\_\_\_\_

**Notes:**

1. Your Library record contains personal information which you are entitled to see and you may seek amendment to the record if you believe it to be inaccurate, out-of-date or incomplete.
2. This form should only be used to request changes to non-system generated information contained in your Library record (for example, notes). It should not be used to: a) request changes to contact information (e.g. address, phone number) which can be made through MySI-net or Aurion, or b) request changes to other system generated information (for example, the number of items on loan to you).
3. Your request should specifically state which details of the record you believe require amendment and include your reasons. For example, *The record does not include any reference to a telephone call made to the Library on X date, explaining that I was in hospital and unable to return overdue books.*
4. This form must be completed and returned to the Loans Desk at any branch library. It may also be faxed to: 07 3365 6888 or sent as an email attachment to [circ@library.uq.edu.au](mailto:circ@library.uq.edu.au).