

Copy/Scan Request Form

School of Music Copy Center

Name _____ Today's Date _____

Date Needed _____ Time Needed _____

Course Number _____ Copy Scan

Number of Copies _____ Pages _____

Faculty Staff TA/GA

Email: _____

Unless otherwise stated, all copies will be black & white and double-sided on 8 ½" x 11" white paper.

Single-sided copies Double-sided copies

Transparency Black & White Color

Paper Size:

8 ½" x 11" 8 ½" x 14" 11" x 17"

Paper Color (8 ½" x 11" only) _____

Collated 3-hole punch Stapled Spiral Bound

Cut to size (please specify in inches) _____

Fold (please describe in detail) _____

Other information _____

Questions or comments?

Contact the Copy Center: music-steno@illinois.edu
(217) 244-1359

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