

**Request Form for Access to
Alabama Digital Humanities Center
(Gorgas Library Room 109-A)**

Name: _____

CWID: _____

Department/Title: _____

Signatures:

Applicant **Date**

Faculty Sponsor (if student applicant) **Date**

Associate Dean, Libraries **Date**

Signature on this form implies agreement to follow the policies, procedures, and guidelines of the ADHC.