



# 2012 Text Book List

Please return by \_\_\_\_\_ to \_\_\_\_\_

Fax No. \_\_\_\_\_

Email \_\_\_\_\_

## 1 Course information

Institution/School/Department \_\_\_\_\_

Course/Subject Number if applicable \_\_\_\_\_

Course/Subject Title \_\_\_\_\_

2012 Course duration:

Sem. 1 only  Sem. 2 only  Full year

Actual enrolment last year \_\_\_\_\_

Estimated enrolment this year \_\_\_\_\_

Internal  External

Lecturer \_\_\_\_\_

Campus Address \_\_\_\_\_

Ph. \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_

Please add me to the Co-op mailing list

**2 No texts required** If no texts required – complete subject and lecturer details, tick here and return form

**3 Texts** (Essential books which students should have – please include any proposed course notes)

Suggested Quantity	Author	Title	Edition	ISBN	Publisher	Other helpful information e.g. Preliminary Reading, Alternatives, etc.	First date of use in 2012	Will book be used again? When?

## 4 Course Notes

Suggested Quantity	Author	Title	Edition	ISBN	Publisher	Other helpful information e.g. Preliminary Reading, Alternatives, etc.	First date of use in 2012	Will book be used again? When?

**5 Recommended Books** (Books which you suggest your students buy if possible)

Suggested Quantity	Author	Title	Edition	ISBN	Publisher	Other helpful information e.g. Preliminary Reading, Alternatives, etc.	First date of use in 2012	Will book be used again? When?

**6 Signature** \_\_\_\_\_ Date \_\_\_\_\_

Please return to  
The Co-op Bookshop

Date completed form received at bookshop \_\_\_\_\_