

**DAVID MANN LIBRARY**  
**ALBURY-WODONGA**

**MEMORANDUM**

**TO:** Linda Sheridan  
Campus Librarian

**FROM:**

**DATE:**

**SUBJECT:** *Library Membership for Sessional Staff Member*

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This memo is to verify that \_\_\_\_\_

is teaching in the subject(s) \_\_\_\_\_

from / / to / / or until the end of Semester \_\_ 200 .

with [please indicate Department] \_\_\_\_\_

Please accept this as authorisation for enrolment as a sessional staff member in the Library.

\_\_\_\_\_  
Head of Department

**La Trobe University Wodonga Institute of TAFE**  
Please circle one.