



Library
Book Donation Form

Name in English: (Mr/Mrs/Ms/Prof/Dr) : _____
(Surname) (First Name)

Phone Number: _____

Donated items

Books Journals Number of items: _____

Title and year of publication:

(1) _____

(2) _____

(3) _____

(Note: If necessary, please attach a separate sheet.)

I would like to have:

Acknowledgement receipt Yes No

If yes, Email: _____

Bookplate(s) with donor's name
to be placed on donated item(s) Yes No

If yes, please provide the name:

I understand that:

- Donated items may not be added to the library collection. These items will not be returned to donors unless prior agreement is made.
- The Library reserves the right to make the final decision on the retention, location, processing and disposal of the donated materials.

Signature: _____

Date: _____

Please return the completed form to library@cihe.edu.hk or call (852) 3653-6620 for enquiries.

Library Use Only

Donation Reference Number: _____

Received date: _____

Handled by: _____