

# Electronic Resource Proposal

## A. Selection Criteria Checklist

<b>To be completed by the Selector Prior to Delivery to CD/Acquisitions or Serials Services</b>	
1.	<p>Signature of liaison requesting the resource</p> <p>Name: _____</p> <p>Date: _____</p> <p>Department: _____</p>
2.	Title/Product Name: _____
	Vendor: _____
	Vendor contact: _____
	URL: _____
	Phone: _____
	Email: _____
3.	<p>Years covered: _____</p> <p>Dates: _____</p>
4.	<p>Justification for selection: _____</p> <p>Justification: _____</p>

## B. Financial/Status Summary

<b>To be completed by the Selector and/or CD/Acquisitions or Serials Services Department Head</b>	
1.	<p>Price:            Please circle            Free:            Yes            No</p> <p>Purchase price is greater than \$300, route to Collection Development Coordinator for authorization signatures or to the Associate Dean for Collection Services if \$500 or more.</p> <p>Signature: _____</p> <p>Free with print:    Yes            No</p> <p>If yes to either of the above, forward the completed forms to CD/Acquisitions or Serials Services Department Head for the appropriate signature.</p> <p>Signature: _____</p> <p>One time purchase:    Yes            No</p> <p>Annual subscription:    Yes            No</p>
2.	<p>Funding: _____</p> <p>Unicorn fund code: _____</p> <p>Other department budget code and authorizing name if applicable for cost sharing: _____</p>

3. Special discount and terms: _____		Describe:	
4.	Subscription information Circle where appropriate _____	Current print title on subscription: Yes      No	
		Library Holdings, if applicable:	
		Will cancel print:      Yes      No	
5. License reviewed/completed:		Yes	No
6.	Signature:		

### C. Access Checklist

<b>To be completed by the Selector Prior to Delivery to ERS� or LAN Administrator</b>			
1.	Material format: Circle appropriate format.	Web-Based	Yes      No
		CD-ROM	Yes      No
		DVD-ROM	Yes      No
		Other (describe):	
2.	Desired Delivery Method <b>NOTE:</b> If LAN, deliver form and resource to LAN Admin for testing, otherwise deliver form and resource to Electronic Resources Librarian for Web testing. _____	Web (include URL/access instructions)	
		LSU Libraries' LAN?	Yes      No
		Standalone /location?	
		Other (describe)	
3.	Is additional Hardware required? Circle one	No	
		Yes, (describe):	
4.	Is additional Software required? Circle one	No	
		Yes, (describe):	

5.	Coverage Specified in License	Unrestricted	Yes	No
	*LSU Libraries includes Middleton, Hill, CEBA Chemistry, Design	LSU Campus LSU Libraries* Other LSU Locales:	Yes	No

**D. Authorizations and In Process Tracking Signatures**

<b>To be completed by the following as the resource is processed.</b>		
1.	Subject Liaison/Coordinator:	Date:
2.	Action taken by CD/Acquisitions/Serials:	Date:
3.	Action taken by Cataloging:	Date:
4.	Action taken by Electronic Services Coordinator:	Date:
5.	Action taken by LAN Administrator:	Date:
6.	Subject Liaison notified of completion:	Date: