

By filling out this form, you agree to our policy and understand that you abide by these guidelines.

(Only 3 requests per patron- NO AV requests)

Date: _____	Staff Initials: _____
Name: _____	
Library Card # _____	
Phone # or Email address: _____	
Date Needed By: _____	
<i>Please provide date as a request could take longer than 3 weeks to fulfill.</i>	

Book Request

Author: _____	
Title of Book: _____	
ISBN: _____	OCLC# _____
Additional Information: _____	

Article Request

Magazine/Journal Title: _____	
Article Author & Title: _____	
ISSN#: _____	Volume#: _____
Issue#: _____	No: _____
Page(s): _____	Date of Mag/Journal: _____
Additional Information: _____	
