

TEACHER REQUEST FORM

The Urbana Free Library Children's Department
210 W. Green Street, Urbana IL, 61801
Phone: 217-367-4069 Fax: 217-531-7077

Submit at Children's Question Desk, by fax, or use our new online form at
www.urbanafreelibrary.org

Please fill in this form completely and
return to the library.

Requests should be made at least one week
in advance of the pickup date you select.

Date of Request: _____

Date of Expected Pickup: _____

Teacher's Name: _____

School: _____

Phone (work): _____

Phone (home): _____

SUBJECT AREA(Please be as specific as possible): _____

GRADE or AGE LEVEL: _____

FORMATS (Circle all that apply):

Fiction

Nonfiction

Magazine Articles

Videos

Websites

Other

NUMBER OF ITEMS NEEDED (Limit 20): _____

Pick up items at the Children's Question
Desk on the lower level of the library.
No Holiday books please.

All items will be returned to shelves on
the day after the requested pickup date
Unless we are notified.

Date request filled: _____

Initials of librarian filling request: _____