

Teacher Request Form

Please fill out this form completely and return it to the Library to the Children's Question Desk,
by fax (217-531-7077), by email (childrens@urbanafree.org), or use the online form at
<http://urbanafreelibrary.org/teacher-request-form>

Date of request _____ Date of expected pick-up _____

Teacher's name _____ School _____

Library card number _____

Phone (work) _____ Phone (home) _____

Email (required) _____

Subject area (please be as specific as possible):

Grade(s) _____ or age level(s) _____

Formats (check all that apply):

Fiction Non-fiction DVDs Kits Music Magazine Articles Websites Other

How many items would you like? _____

You will be notified when your items are available for pick-up at the circulation desk.

Items will be returned to the shelves for other users to check-out seven days after we contact you to pick them up.

Staff initials _____



The Urbana Free Library

Adult and Youth Services • 210 West Green Street • Urbana, Illinois 61801 • 217-367-4069 • fax: 217-531-7077