



## Library Book Request Form

Title of Book \_\_\_\_\_

Author \_\_\_\_\_

ISBN \_\_\_\_\_

*Please answer the following questions regarding the book.*

Why are you recommending this book? \_\_\_\_\_

\_\_\_\_\_

Would you be willing to contribute to the cost of the book? Yes \_\_\_ No\_\_\_

Would you like to be notified if the book is obtained? Yes \_\_\_ No \_\_\_

### Contact Information:

Name \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

*Please return the completed form to the library or the front office.*