

AZALEA REGIONAL LIBRARY SYSTEM
INTERLIBRARY LOAN / INTRALIBRARY LOAN REQUEST

DATE _____ MEMBER LIBRARY _____

AUTHOR _____

TITLE _____

SUBJECT _____

If unavailable, will patron accept a substitute? YES _____ NO _____
(Please explain in subject line above, if yes)

If patron needs materials/s for study or research, please specify grade level _____

Material/s not needed after this date _____

PLEASE PRINT

NAME _____ PHONE (CELL) _____

ADDRESS _____

CITY _____ ZIP _____

Patron agrees to accept responsibility for request material/s as noted by signature below:

Contact/ Member Library Staff: _____

(Below to be filled out by Regional Staff Only)

DATE RECEIVED FROM MEMBER LIBRARY: _____ DUE: _____

REQ: _____

RECEIVED: _____

RENEWAL REQUESTED: _____

DATE RENEWED: _____

DATE RETURNED: _____

SEARCH TRAIL:

_____ MA

_____ PU

_____ JA

_____ HA

_____ GR

_____ MR

_____ SC

_____ OK

_____ WG

OCLC: _____

IL#: _____

AZRLS COMPUTER REF: _____

LETTER: _____

OVERDUE NOTICE:

1ST _____ 2ND _____

3RD _____ 4TH _____

5TH _____ 6TH _____