SHARE Interlibrary Loan Form DISTRICT #90

PRINT CLEARLY

Student Name:	School
	(LAST, FIRST)
Today's Date:	Teacher's NAME
TITLE of Item request	red:
AUTHOR or EDITOR	R of Item requested: (last name, first name):
control number	(found in the MORE ABOUT IT tab) Available in District 90? yes no
Please verify your appro	E
	RETURN COMPLETED FORM TO YOUR SCHOOL LIBRARY
District 90 junior higl	
=======================================	DISTRICT #90 SHARE Interlibrary Loan Form
	<u>PRINT CLEARLY</u>
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Today's Date:	Teacher's NAME
TITLE of Item request	red:
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Please verify your appro	E
For staff use:	RETURN COMPLETED FORM TO YOUR SCHOOL LIBRARY

Date ordered: Date shipped: Date received:

Note: Parent signature is required for items borrowed **outside** District 90 or if a **K-5 student** wants material from a District 90 junior high collection.