

SWON Interlibrary Loan Request Form
One Request per Form

Requesting Library

Date: _____
To: _____
Fax Number: _____
From: _____
Phone Number: _____
Email: _____
Note: _____

Supplying Library

Date: _____
To: _____
Fax Number: _____
From: _____
Phone Number: _____
Email: _____
Note: _____

Patron: _____ Status: _____

This request is for a Book/Audiovisual [] Photocopy [] (Citation Information Below)

Book Author _____

Book Title _____

Publisher _____ Place _____ Date _____

Audiovisual title _____
_____ Date of Publication _____

Serial title _____

Volume / issue _____ Date _____ Pages _____

Author of article _____

Title of article _____

Request complies with

[] 108(g) (2) Guidelines (CCG) 6 Articles within last 5 years & lost, missing, vandalized

[] other provision of copyright law (CCL) Prior to 5 years, unable to obtain under Fairs use becomes part of collection

Holdings Verified: Yes [] No [] Call# _____

LENDING LIBRARY USE

Ship Via: Delivery Service [] Other [] Fax [] Email []

Date Supplied: _____ **Due Date:** _____ **Completed:** _____

Restrictions: Library Use Only [] No Photocopying [] No Renewal []

Not Sent Because: Checked Out [] Non circulating [] Missing/Lost [] Other []

BORROWING LIBRARY USE

Date Received: _____ **Date Returned:** _____ **Renewal:** _____

Book Lost Please Bill []