

THE STATE LIBRARY OF OHIO

PLEASE PRINT OR TYPE

Application For Talking Book Machine and Regional Library Services – Schools

School _____

Address _____ County _____

City, State, Zip _____

Contact Person _____ Phone () _____

Number of Eligible Users: _____ Age Range _____

Grade and/or Reading Levels: ___ K-3 ___ 4-8 ___ Teenage ___ Adult

Services Requested. Please indicate the number of machines and attachments needed.

___ Talking Book Machine(s) and Discs. Plays 8 rpm, 16 rpm, and 33 rpm disc.

___ Cassette Player(s) and Cassettes. Plays 1 7/8 ips, 15/16 ips, 2-track and 4-track cassettes.

___ Braille Books.

Special Attachments Requested:

___ **Headphones.** Supplied only to individuals who require them to use the service where regular playback is not possible (Please Note: Commercial headphones, with adapter, may be purchased from a store to be used with Library of Congress equipment).

Specify reason for request _____

___ **Amplifier With Headphones.** For the hearing impaired. A special application, signed by a physician or audiologist, is necessary.

___ **Remote Control Unit.** For individuals confined to bed, or who have low mobility or greatly restricted use of hands or arms. A special application is necessary.

___ **Key Extension Levers.** For severely disabled individuals with limited use of hands or arms, who have difficulty manipulating key controls on cassette player.

___ **Tone Arm Clip.** For individuals with limited use of hands to help in placing tone arm on record. For disc player.

Certification. To be completed by school principal or school district administrator:

I certify that reading materials and equipment borrowed will be used only by students who are unable to read or use standard printed material because of blindness, visual disabilities, or physical limitation. The reading materials and equipment borrowed will be returned to the issuing agency when reading materials are no longer being borrowed from the Cincinnati or Cleveland Regional Library.

Name of administrator _____

Street Address _____ Telephone () _____

City _____ State _____ Zip _____

Signature of Administrator _____ Date _____

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REGIONAL LIBRARY SERVICE

Reading Preferences for School Use

The Library will select books for the school in the categories checked below. Specific titles may also be requested.

Fiction

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> Adventure | <input type="checkbox"/> Historical novels | <input type="checkbox"/> Humor | <input type="checkbox"/> Religious fiction |
| <input type="checkbox"/> Animals | <input type="checkbox"/> American | <input type="checkbox"/> Light/wholesome | <input type="checkbox"/> Romantic suspense |
| <input type="checkbox"/> Bestsellers * | <input type="checkbox"/> Historical novels | <input type="checkbox"/> Love stories | <input type="checkbox"/> Science fiction |
| <input type="checkbox"/> Classics | <input type="checkbox"/> Foreign | <input type="checkbox"/> Mysteries | <input type="checkbox"/> War stories |
| <input type="checkbox"/> Fantasy | <input type="checkbox"/> Horror | | <input type="checkbox"/> Westerns |

Non-Fiction

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> Adventure | <input type="checkbox"/> Computers | <input type="checkbox"/> Health | <input type="checkbox"/> Religion |
| <input type="checkbox"/> Animals | <input type="checkbox"/> Cooking | <input type="checkbox"/> History, American | <input type="checkbox"/> Catholic |
| <input type="checkbox"/> Aging/Retirement | <input type="checkbox"/> Crafts/Hobbies | <input type="checkbox"/> History, Foreign | <input type="checkbox"/> Islam |
| <input type="checkbox"/> Bestsellers * | <input type="checkbox"/> Current Events | <input type="checkbox"/> Inspirational/Self-
improvement | <input type="checkbox"/> Judaism |
| <input type="checkbox"/> Biography | <input type="checkbox"/> Disabilities | <input type="checkbox"/> Nature | <input type="checkbox"/> Protestant |
| <input type="checkbox"/> "Newsmakers" | <input type="checkbox"/> Ethnic interests | <input type="checkbox"/> Ohio interest | <input type="checkbox"/> Other |
| <input type="checkbox"/> Presidents | <input type="checkbox"/> Asian | <input type="checkbox"/> Personal hygiene | <input type="checkbox"/> Science |
| <input type="checkbox"/> Stage/Screen | <input type="checkbox"/> Black interests | <input type="checkbox"/> Philosophy | <input type="checkbox"/> Sports |
| <input type="checkbox"/> Other | <input type="checkbox"/> European | <input type="checkbox"/> Plays | <input type="checkbox"/> Supernatural
phenomena |
| <input type="checkbox"/> Books made into
movies | <input type="checkbox"/> Jewish | <input type="checkbox"/> Poetry | <input type="checkbox"/> Travel/Geography |
| <input type="checkbox"/> Business | <input type="checkbox"/> Native American | <input type="checkbox"/> Psychology | <input type="checkbox"/> War |
| | <input type="checkbox"/> Other | | <input type="checkbox"/> Other |

Favorite authors: _____

Number of Talking Books wanted in initial shipment: _____

Books in foreign languages are available on request. Please contact the library for further details.

Mark here if you are willing to accept books that contain:

Explicit sex _____ Yes ___ No Rough language _____ Yes ___ No Violence _____ Yes ___ No

***PLEASE NOTE:** Bestsellers very often contain sex, strong language and violence.

