SCHOOL BOOK BAG REQUEST
Wheaton Public Library   Children’s Department
Children’s Dept. 630-868-7540   E-mail: elemsbkb@mail.wheaton.lib.il.us   FAX 630-668-8950

Today’s Date_____________   Pickup Date______________
Ready by 9 a.m. at Adult Circ. Desk

School_______________________________________________________________________

Teacher/Librarian’s Name_______________________________________________________

Phone_________________________ Grade____________________________

Number of students using materials______________   Fiction   Y or N
Nonfiction   Y or N
Optimal number* of books desired______________   Kits, Audio books, CD   Y or N
*(if available)

Duplicate requests from the same school will be handled as one book bag request to be shared between classrooms.

Subject:

Specific subject examples?

Specific titles desired?

Reading level (s)?

5 BUSINESS DAYS, PLEASE

Requested on:   Available:*
Monday______________________Saturday/Sunday
Tuesday______________________Monday
Wednesday___________________Tuesday
Thursday______________________Wednesday
Friday_______________________Thursday
Saturday/Sunday_______________Friday

*Book Bags not picked up after 5 days will be checked back in and returned to our shelves. Book Bags may be ordered no earlier than 3 weeks in advance. Do not return book bags to the Community Center. All book bags must be returned to the Wheaton Public Library.

9/07   Juv. Initials_______