



Application for Free Library Service: Individuals

Please complete this application and send it to the address listed above

Please print or type:

Name (last) _____ (First) _____ (Middle) _____

Street address _____

City _____ County _____ State _____ ZIP _____

Telephone (Daytime) _____ Date of birth _____

Telephone (Evening) _____ Gender _____

E-mail address _____

Please give the name of a person to contact if you cannot be reached for an extended period:

Name _____ Telephone _____

- ☐ Please check here if you have been honorably discharged from the armed forces of the United States.

Indicate the primary disability preventing you from reading regular printed material. See definitions under eligibility criteria. Check only one box.

- ☐ **Blindness** ☐ **Physical handicap** ☐ **Deaf-blindness**
☐ **Visual handicap** ☐ **Reading disability** (Please note * on p.2)

In addition to any of the qualifying disabilities above, do you also have a hearing impairment? If yes, indicate the degree of hearing loss.

- ☐ **Moderate**—some difficulty hearing and understanding speech.
☐ **Profound**—cannot hear or understand speech.

Notice: Records relating to recipients of Library of Congress reading materials are confidential except for those portions defined by local law as public information. To find out the extent to which the information provided on this application form may be released to other individuals, institutions, or agencies, consult the agency to which you are submitting this application.

Eligibility of Blind and Other Physically Handicapped Persons for Loan of Library Materials

The following persons are eligible for service: Residents of the United States, including territories, insular possessions, the District of Columbia, and American citizens living abroad.

1. Blind persons whose visual acuity, as determined by competent authority, is 20/200 or less in the better eye with correcting lenses, or whose widest diameter of visual field subtends an angular distance no greater than 20 degrees.

2. Other physically handicapped persons are eligible as follows:

(a) Persons whose visual disability, with correction and regardless of optical measurement, is certified by competent authority as preventing the reading of regular printed material.

(b) Persons certified by competent authority as unable to read or unable to use regular printed material because of physical limitations.

(*) Persons certified by competent authority as having a reading disability resulting from organic dysfunction and of sufficient severity to prevent reading regular printed material in a conventional manner.

Certifying authority:

- In cases of blindness, visual impairment, or physical limitations, "competent authority" includes doctors of medicine; doctors of osteopathy; ophthalmologists; optometrists; registered nurses; therapists; and professional staff of hospitals, institutions, and public or private welfare agencies (e.g., social workers, case workers, counselors, rehabilitation teachers, and superintendents). In the absence of any of these, certification may be made by professional librarians or by any person whose competence under specific circumstances is acceptable to the Library of Congress.
- * In the case of a reading disability from organic dysfunction, competent authority is defined as doctors of medicine and doctors of osteopathy who may consult with colleagues in associated disciplines.

To Be Completed by Certifying Authority (Definitions of certifying authority are listed above.) I certify that the named applicant requesting library service is unable to read or use regular printed material for the reason indicated on this form.

Signature _____ Date _____

Please print or type:

Name _____

Title and occupation _____ Organization _____

Street address _____ Telephone _____

City _____ State _____ ZIP _____

Lending of Materials and Classes of Borrowers

Veterans. According to Public Law 89-522, blind and other physically handicapped persons who have been honorably discharged from the armed forces of the United States must receive preference in the lending of books, recordings, playback equipment, musical scores, instructional texts, and other specialized materials.

Institutions. Institutions such as schools, residential care facilities, hospitals, and other establishments regularly attended by blind and/or physically handicapped individuals may borrow special-format reading materials and playback equipment solely for the use of persons certified as eligible, who must be the direct and only recipients of the materials and equipment provided by NLS.

Reading Preferences

Check A or B

☐ A. Do not select books for me. Send only the specific titles that I request.

☐ B. I wish to have books selected for me.

Note: If you wish to have books selected for you, the library needs information about your reading interests. Please check the types of books or subjects you prefer. You may also write your reading interests in the space provided below:

- | | | |
|--------------------------------------------------|--------------------------------------------------------|---------------------------------------------------|
| <input type="checkbox"/> Adventure stories | <input type="checkbox"/> Fantasy | <input type="checkbox"/> Poetry |
| <input type="checkbox"/> Animals and wildlife | <input type="checkbox"/> Folklore | <input type="checkbox"/> Psychology and self-help |
| <input type="checkbox"/> Bestsellers | <input type="checkbox"/> Gardening | <input type="checkbox"/> Religion, creed |
| <input type="checkbox"/> Bible | <input type="checkbox"/> Gothic novels | <input type="checkbox"/> Romance |
| <input type="checkbox"/> Biographies | <input type="checkbox"/> Government, law, and politics | <input type="checkbox"/> Science |
| <input type="checkbox"/> Business and economics | <input type="checkbox"/> Health | <input type="checkbox"/> Science fiction |
| <input type="checkbox"/> Career and job training | <input type="checkbox"/> Historical fiction | <input type="checkbox"/> Sea stories |
| <input type="checkbox"/> Children's fiction: | <input type="checkbox"/> History—U.S. | <input type="checkbox"/> Short stories |
| Grade level _____ | <input type="checkbox"/> History—world | <input type="checkbox"/> Sports |
| <input type="checkbox"/> Children's nonfiction: | <input type="checkbox"/> Humor | <input type="checkbox"/> Spy stories |
| Grade level _____ | <input type="checkbox"/> Music appreciation | <input type="checkbox"/> Stage and screen |
| <input type="checkbox"/> Classic novels | <input type="checkbox"/> Mysteries | <input type="checkbox"/> Suspense stories |
| <input type="checkbox"/> Cooking and homemaking | <input type="checkbox"/> Nature | <input type="checkbox"/> Travel |
| <input type="checkbox"/> Drama | <input type="checkbox"/> Occult and supernatural | <input type="checkbox"/> War and war stories |
| <input type="checkbox"/> Family stories | <input type="checkbox"/> Philosophy | <input type="checkbox"/> Westerns |

Other preferences: _____

☐ Check this box if you wish to receive books in English language only. If you wish to receive books in other languages, list the languages:

I do not wish to receive books that contain (check all that apply):

- ☐ Strong language ☐ Violence ☐ Explicit descriptions of sex

Patron's name _____

Books, Magazines, Materials, and Equipment Accessories

Please check the box provided for any of the following items and/or services that you wish to receive.

Accessories for digital talking-book player

- | | |
|------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Books recorded on digital cartridge with digital player | <input type="checkbox"/> Amplifier (issued solely for use by readers with profound hearing loss; ask for a separate application) |
| <input type="checkbox"/> Braille and Audio Reading Download (BARD) For use with a home PC or mobile device | <input type="checkbox"/> Headphones (issued solely for use where speakers are not permitted) |
| <input type="checkbox"/> Braille books | <input type="checkbox"/> Pillow speaker (issued solely to readers confined to bed) |
| <input type="checkbox"/> Braille magazines | |
| <input type="checkbox"/> Magazines on digital cartridge | |

Music materials

- ☐ Music instruction on digital cartridge
- ☐ Music magazines in braille
- ☐ Music scores in braille
- ☐ Music scores in large print

(Note: Recorded music for recreational listening is not available through this program.)

Return of Equipment

Playback equipment and accessories are supplied to eligible persons on extended loan. If this equipment is not being used for reading recorded material, please return it to the Connecticut State Library, Library for the Blind and Physically Handicapped, 198 West St., Rocky Hill, CT 06067. In lieu of postage mark the box "Free Matter for the Blind."

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