

# **The Library of Congress** Washington, DC 20542

(202) 707-5100

### **Application for Free Library Service: Individuals**

Please complete this application and send it to the library for the blind and physically handicapped serving the state in which you reside. If you do not know the library's address, send it to the National Library Service for the Blind and Physically Handicapped (NLS), which will forward it to the appropriate library.

| Please Print or Type   |                              |                                    |                       |  |
|--|------------------------------|------------------------------------|-----------------------|--|
| Name (Last)  |                              | (First)                            |                       | (Middle)                               |
| Street address   |                              |                                    |                       |  |
| City   | County _                     |                                    | State                 | ZIP                                    |
| Telephone (Daytime) (  | )_                           |                                    | Date of               | f birth                                |
| Telephone (Evening) (  | )                            |                                    | Gender                | ·                                      |
| E-mail address   |                              |                                    |                       |  |
| Please give the name of period: Name   | -                            | -                                  |                       |  |
| ☐ Please check here if of the United States.   | f you have b                 | een honorably d                    | lischarged fr         | om the armed forces                    |
| Indicate the primary dis<br>See definitions under ele<br>☐ Blindness ☐ Visual handicap | igibility crite              | eria. Check onl<br>nysical handica | y one box.  p         | ular printed material.  Deaf-blindness |
| In addition to any of the impairment? If yes, ind  ☐ Moderate—some of Profound—cannot  | icate the dead difficulty he | gree of hearing aring and under    | loss.<br>standing spe | _                                      |
| Notice: Records relat  | ing to recini                | ents of Library                    | of Congress           | reading materials                      |

**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.
  - (c) 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: |  |  |  |  |  |
|---|--|--|--|--|--|
| ☐ Ani ☐ Bes ☐ Bib ☐ Bio ☐ Bus ☐ Car ☐ Chi ☐ grad ☐ Chi ☐ grad ☐ Cla ☐ Cool ☐ hon ☐ Dra  | graphies siness and economics eer and job training ldren's fiction: de level ldren's nonfiction: de level ssic novels oking and nemaking |  | Fantasy Folklore Gardening Gothic novels Government, law, and politics Health Historical fiction History—U.S. History—world Humor Music appreciation Mysteries Nature Occult and supernatural Philosophy |  | Poetry Psychology and self-help Religion, creed Romance Science Science fiction Sea stories Short stories Sports Spy stories Stage and screen Suspense stories Travel War and war stories 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 | o not wish to receive books that contain (che  | ck a  | Il that apply):   |  |  |
|------|--|---|---|--|--|
|      | Strong language  |   | ☐ Explicit descriptions of sex  |  |  |
| Pat  | ron's name   |   |   |  |  |
| Ple  | oks, Magazines, Materials, and Equipment as echeck the box provided for any of the foliose. (Consult the enclosed Facts: Playback I and to Eligible Individuals and Institutions for | llow<br>Mach  | ing items and/or services that you wish to<br>tines and Accessories Provided on Free                    |  |  |
|      | Books recorded on digital cartridge with digital player  |   | Accessories for digital talking-book player   |  |  |
|      | Braille and Audio Reading Download (BARD)  | Ш   | Amplifier (issued solely for use by readers with profound hearing loss; ask for a separate application) |  |  |
|      | Books recorded on audiocassettes with standard cassette player   |   | Headphones (issued solely for use where speakers are not permitted)                                     |  |  |
|      | Braille books  |   | Pillow speaker (issued solely to readers  |  |  |
|      | Braille magazines  |   | confined to bed)  |  |  |
|      | Magazines recorded on audiocassettes   | Mu  | sic materials   |  |  |
| Ac   | cessories for cassette book machines   |   | Music instruction on audiocassette  |  |  |
|      | Amplifier (issued solely for use by  |   | Music instruction on digital cartridge  |  |  |
|      | readers with profound hearing loss; ask for a separate application)  |   | Music magazines in braille  |  |  |
|      |  |   | Music scores in braille   |  |  |
|      | Breath switch  |   | Music scores in large print   |  |  |
|      | Extension levers   |   |   |  |  |
|      | Headphones (issued solely for use where speakers are not permitted)  | (Note: Recorded music for recreational listening is not available through this pro- |   |  |  |
|      | Pillow speaker (issued solely to readers confined to bed)  |   |   |  |  |
|      | Remote control unit (issued for readers confined to bed or who have difficulty with mobility; ask for separate application)  |   |   |  |  |

## **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 provided by the Library of Congress and its cooperating libraries, please return it to the issuing agency.