

BOOK REQUEST FORM
INTER-LIBRARY LOAN



Health Libraries for North Staffordshire

One request per form. Please write clearly.

Author/Editor(s)

Title

Edition **Publisher** **Year** **ISBN**

If you only need a copy of a section from the above please give details, and tick against the copyright declarations to confirm you have read and agree to them.

Pages required **Author of section**

Title of section Title

Your name

Library card no. _ _ _ _ _

Email

Tel / beep:

Fax

Deadline (if applicable)

Organisation

University Hospital of North Midlands (UHNM)

County Hospital *Royal Stoke*

Combined Healthcare NHS Trust

Staffordshire & SOT ICB (Integrated Care Board)

NHS GP and Practice Staff in Staffordshire

Keele University – staff

Keele University – student

Other (please state)

If you only require a section, and have paid in advance, we may contact you to confirm delivery address. Otherwise items must be collected from the library.

Copyright declaration:

Please tick to indicate you agree with all of the below copyright declarations and date.

I declare that:

I have not previously been supplied with a copy of the same material by you or any other librarian.

I will not use the copy except for research for a non-commercial purpose or private study; and will not supply a copy of it to any other person.

To the best of my knowledge no other person with whom I work or study has made or intends to make, at or about the same time as this request, a request for substantially the same material for substantially the same purpose.

Date

The library Privacy Notice can be accessed at <https://www.keele.ac.uk/healthlibrary/aboutus/regulationspolicies/>

Health Library for North Staffordshire

Clinical Education Centre, Royal Stoke University Hospital,

University Hospitals of North Midlands NHS Trust, Newcastle Road, Stoke-on-Trent, STS4 6QG

LIBRARY STAFF USE ONLY

To be paid on collection:

Fee paid:

To be added to account:

Been put on account:

BL fee been put on account:

Additional BL fee to be paid:

Requested from: Details: Date requested:

Electronic

WMIDS

INC - LENDs Library:

 - **EDEN Library:**

 - **PANDDA Library:**

 - **KSS Library:**

 - **SWIMS Library:**

BLDSC

Other: _ _ _ _ _

Notes/Reports:

.....

.....

.....

Delivery – if only a section:

Emailed / posted / faxed (indicate as appropriate) & **date of dispatch:**

To collect from the library: