

**ARBOR PARK  
SCHOOL DISTRICT 145**

**PARENT LENDING LIBRARY BOOK REQUEST FORM**

Book List available at <http://> \_\_\_\_\_

Title of Item Requested:  
\_\_\_\_\_

Your Name:  
\_\_\_\_\_

Phone  
#: \_\_\_\_\_

Your Child's Name: \_\_\_\_\_

School: **Morton Gingerwood \* Arbor Park MS \* Scarlet Oak \* Kimberly Heights**

Teacher: \_\_\_\_\_

Grade: \_\_\_\_\_

Date: \_\_\_\_\_

Send book home with student

Call for pick up at school

Item will be sent home in an envelope. Books are on loan for a 2 week period. Please allow up to a week for your request to be processed.

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**FOR SCHOOL USE ONLY:**

Date Released: \_\_\_\_\_ Date Due: \_\_\_\_\_

Date Returned: \_\_\_\_\_

Processed by: \_\_\_\_\_

Processed by: \_\_\_\_\_