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| --- | --- |
| Logo shows an open book, btbl written in braille dots across its pages. From the top of the book come concentric rings symbolizing sound waves. The outermost ring reads BRAILLE AND TALKING BOOK LIBRARY.  A ribbon banner below the open book reads BTBL. At bottom reads CALIFORNIA STATE LIBRARY. | Braille and Talking Book LibraryP.O. Box 942837Sacramento, CA 94237-0001(916) 654-0640 Toll-Free 1-800-952-5666 FAX (916) 654-1119btbl@library.ca.gov  |
| APPLICATION FOR FREE LIBRARY SERVICES INDIVIDUALS |



# Please print or type

Name (Last) (First) (Middle) Street Address City County State Zip Primary Telephone Date of Birth Alternate Telephone Email Address

Alternative contact if you cannot be reached for an extended period:

Name

Telephone Email

Indicate the primary disability preventing you from reading printed material.

* Blindness
* Visual Impairment
* Physical Disability
* Reading

Disability

* Deaf/Blindness (i.e. Deaf AND Blind

If you also have a hearing impairment, please indicate the degree of hearing loss:

* Moderate – Some difficulty hearing and understanding speech
* Profound – Cannot hear or understand speech
* Please check here if you have been honorably discharged from the Armed Forces of the United States. By law, preference in the lending of books and equipment is given to veterans.

 How did you hear about us?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

All patrons MUST abide by the published policies and procedures for BTBL service: [www.btbl.ca.gov/policies](http://www.btbl.ca.gov/policies). To remain active, patrons must borrow or download at least one book or magazine per year.

**NOTE:** Personal information is confidential except for those portions defined by law as public information. To learn what information provided on this application form may be released to other individuals, institutions, or agencies, please consult the agency to which you are submitting this application.

# Eligibility and Certification

Persons eligible for this free service must be certified by either a medical professional or various employees of social services agencies, including libraries. The following people are eligible for service: residents of the United States, including territories, insular possessions, and the District of Columbia, and American citizens living abroad, provided they meet one of the following criteria:

1. An individual who is blind or has a visual impairment that makes them unable to comfortably read print books.
2. An individual who has a perceptual or reading disability.
3. An individual who has a physical disability that makes it hard to hold or manipulate a book or to focus or move the eyes as needed to read a print book.

Please see [www.loc.gov/nls/about/eligibility-for-nls-services](http://www.loc.gov/nls/about/eligibility-for-nls-services) for the full eligibility terminology.

# Certifying Authority

Eligibility must be certified by one of the following: doctor of medicine, doctor of osteopathy, ophthalmologist, optometrist, psychologist, registered nurse, therapist, or professional staff of hospitals, institutions, and public or welfare agencies (such as an educator, librarian, social worker, case worker, counselor, rehabilitation teacher, certified reading specialist, school psychologist, or superintendent).

# To be completed by Certifying Authority

(Please print or type): Name Title Name of Agency: Email Address Phone City State Zip

I certify that this applicant is eligible for NLS services.

Signature \_ \_\_\_\_\_\_\_\_\_Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_

 A typed or handwritten signature is acceptable after all certifying data is completed.

# Service delivery for library materials (check all that apply)

* Audio books and magazines on digital cartridges via mail (Includes the loan

of a special digital player)

* Hardcopy braille books and magazines via mail
* Downloadable audio and braille books and magazines through the Braille and

Audio Reading Download (BARD) service and BARD Mobile app for iOS, Android,

and Kindle Fire

* Audio versions of newspapers and magazines through a touch-tone telephone

(NFB-NEWSLINE® service)

* Movies and TV shows with audio description via mail (does not include equipment —

 just loaned DVD)

Accessories for digital players:

* Headphones
* Pillow speaker (issued solely to readers confined to bed)
* Breath switch (requires a separate application signed by certifying authority)
* High Volume Player (issued solely for use by readers with profound hearing loss; requires a separate application signed by a doctor or audiologist)

# Optional: please check all the types of books or subjects you prefer.

 Age Range:  Adult Titles  Young Adult Titles  Children’s Titles, Grade:

Subject Category:

* Adventure  Bestsellers/Fiction  Bestsellers/Nonfiction
* Biography  Classics  Cooking
* Gardening  Historical Fiction  History
* Mystery  Politics  Psychology/Self-Help
* Religious Fiction  Romance  Science
* Science Fiction  War/Military Westerns Please indicate additional titles, authors, genres, or topics:

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

* Strong language  Violence  Explicit descriptions of sex
* I am interested in receiving books in languages other than English (please list other

languages):

NOTICE: The information required on this application pertains to eligibility for and establishment of free library service for individuals with print disabilities. This information is required by the Library of Congress National Library Service for the Blind and Print Disabled.

CONFIDENTIALITY: All information on this application remains confidential as outlined in California State Executive Order No. B-22-76.

(fold application in half, staple once/lightly tape, and mail; no postage due)

Free Matter for the Blind

Or Handicapped

Braille and Talking Book Library

P.O. Box 942837

Sacramento, CA 94237-0001

[staple/tape]