

North Kansas City Public Library Teacher Assistance Form

Date: _____

Name: _____

Card Number: _____

Email Address: _____

Phone Number: _____

Best time to contact with questions: _____

School: _____

Grade(s): _____

Subject(s): _____

Date materials are needed (please allow 2 weeks): _____

Date materials are needed through: _____

Number of sources required: _____

Type(s) of materials needed (circle all that apply):

Juvenile Fiction

Juvenile Non-Fiction

Music (CD)

Video (DVD)

Additional comments or instructions:

If there are any materials that are **not** permitted, please describe:

Requests can be:

Emailed: KFoster@nkcp.org

Mailed: 2251 Howell St. North Kansas City, MO 64116

Hand Delivered

Please call 816.221.3360 or email KFoster@nkcp.org with any questions.