



Oklahoma Library for the Blind and Physically Handicapped

300 N.E. 18th Street, Oklahoma City, Oklahoma 73105

405-521-3514

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Toll free: 1-800-523-0288

TDD: 405-521-4672

E-mail: olbph@okdrs.gov

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OKLAHOMA
Rehabilitation Services

Institutional Application for Free Library Service

Library records are confidential.

Name of Institution _____

Mailing address _____

City _____ County _____ State **OK** ZIP _____

E-mail address _____

Staff member who will be responsible for this service (person to be contacted by the library):

Name _____ Title _____

Phone/Extension _____

Eligible Applicants

Nursing homes, libraries, hospitals and schools for the blind or physically handicapped may borrow equipment and reading materials for use by eligible patrons in either a group setting or for individual use. The institution is responsible for keeping a record of the serial numbers of all machines assigned to the institution. Eligible residents, not the institution, are responsible for equipment borrowed directly using individual application.

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.

Public or private schools where handicapped students are enrolled must submit an institutional application as well as individual applications for each student accompanied by certification of eligibility for each applicant.

For music materials, i.e., scores, instructional recordings, music magazines, individual applications must be submitted.

Number of persons unable to read or use regular printed material who will be served:

Talking book readers: _____ Braille readers: _____

To Be Completed by Certifying Authority

“Certifying 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. In the absence of any of these, certification may be made by professional librarians. In the case of a reading disability, a M.D. or D.O. must certify this application.

Please print or type except for your signature.

I certify that the institution named serves persons who are unable to read or use standard printed material because of blindness, visual disabilities or physical limitations. I further certify that the reading materials and equipment borrowed will be used by such persons only.

Name of Administrator _____ Title _____

Mailing Address _____ Phone _____

City _____ State _____ Zip _____

Signature of administrator _____

Books, Magazines, Materials, and Equipment Accessories

Please check the box provided for any of the following items and/or services that you wish to receive.

Optional Equipment

Books recorded on digital cartridge and digital player

Magazines recorded on digital cartridge

Braille books

Braille magazines

High Volume Player. For use by persons with profound hearing loss. Check this box to request an application.

Headphones

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.

Talking Book Topics and Braille Book Review

Talking Book Topics is a bimonthly publication describing the latest books available in audio or braille. This publication is available in large print, cassette or computer disc.

Braille Book Review is a bimonthly publication which lists braille materials available from NLS and is for braille readers only.

Talking Book Topics (Check only one):

- In large print
- On digital cartridge

Braille Book Review (Check only one):

- In braille with print
- In print

Reading Preferences

Adventure stories

Animal stories

Animals and Wildlife

Biographies

Career and Job Training

Children's fiction

Children's nonfiction

Classics

Contemporary Fiction

Cooking and Food

Current Events

Diet and Nutrition

Fantasy

Gothic fiction

Historical fiction

History—U.S.

History—world

Horror Fiction

Mysteries

Poetry

Religion and Inspiration

Religious fiction

Romance

Science

Science fiction

Sports

Suspense stories

Travel and Adventure

True Crime

War fiction

War nonfiction

Westerns

For children's books, please give reading grade level: _____

Other preferences/ favorite authors:

If you wish to receive books in other languages, list the languages:

No strong language

No violence

No sex

No books over 24 hours long

Additional Services

BARD (Braille and Audio Reading Download)

BARD is a service offered by NLS and this library that allows qualified patrons to download audio and braille books and magazines to their computer, where they can unzip the file to a blank digital cartridge or jump drive, and listen to it on their library-provided player. For more information, please enter your email address here:

Note: Public Libraries may only sign up for a demo account on BARD, for the purpose of training individual patrons of the Library for the Blind and Physically Handicapped in its use. For more information, please enter your email address here:

Email: _____

Oklahoma Telephone Reader

Oklahoma Telephone Reader is a free service recorded by volunteers. It offers Oklahoma news over the phone, including editorials, weekly store ads, obituaries and a variety of other articles. For more information, please mark below:

Yes

No

NEWSLINE

NEWSLINE is a free service offered by the National Federation for the Blind that allows patrons access to hundreds of newspapers and magazines via the phone. If you would like more information and an application, please mark below:

Yes

No

Institutional Acknowledgment for NLS Services and Devices

Required for Institutions Serving Users who are Minors (Under 18 Years Old)

As an institution that serves users who are minors, we acknowledge that such users will receive NLS services and equipment and that the institution will have access to the entire NLS catalog of reading material on their behalf. We acknowledge that we will be responsible for receiving any necessary parental or guardian consent. All materials and equipment (including digital talking book cartridges, hard-copy braille, players, and accessories) must be returned when no longer needed.

Date _____

Name of Institution _____

Full Name of Legally Authorized Representative _____

Title of Legally Authorized Representative _____

Street Address _____

City _____ County _____ State _____ ZIP _____

Email Address of Legally Authorized Representative _____

Phone Number of Legally Authorized Representative _____

I have the authority to enter into binding agreements on behalf of my institution and, by signing below, I acknowledge the preceding on behalf of my institution. Signature of Legally Authorized Representative _____

Use of Government Property: NLS program equipment, materials, and products, both online and physical, are federal property. Users shall acknowledge the purpose for which these items were intended and accept responsibility for accessing these items. All materials and equipment (including digital talking book cartridges, hard-copy braille, players, and accessories) must be returned when no longer needed. Personal Information: 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.

VOTER REGISTRATION STATEMENT

Name: _____ Date: _____

IF YOU ARE NOT REGISTERED TO VOTE WHERE YOU LIVE NOW, WOULD YOU LIKE TO APPLY TO REGISTER TO VOTE HERE TODAY?

YES _____ **NO** _____ **I am already registered.**

Signature: _____

1. Applying to register or declining to register to vote will not affect the amount of assistance that you will be provided by this agency.
2. If you would like help in filling out the voter registration application form, we will help you. The decision whether to seek or accept help is yours. You may fill out the application form in private.
3. If you believe that someone has interfered with your right to register or to decline to register to vote, your right to privacy in deciding whether to register or in applying to register to vote, or your right to choose your own political party or other political preference, you may file a complaint with the Oklahoma State Election Board, Room B6, P.O. Box 53156, State Capitol, Oklahoma City, OK 73152, or call 405-521-2391.
4. If you decline to register to vote, the fact that you have declined to register will remain confidential and will be used only for voter registration purposes.
5. If you do wish to register to vote, the office at which you submit a voter registration application will remain confidential and will be used only for voter registration purposes.
6. If you do not check any box, you will be considered to have decided not to register to vote at this time.