

Gawler Public Library

Purchase Suggestion

Name _____

Address _____

Phone _____

Email _____

Library barcode number _____

Details of item being requested

Author _____

Title _____

Format (book, DVD, Blu-ray, etc) _____

Name of staff member taking request _____

Thank you for your request. The item you have requested for purchase by the Library will be assessed in accordance with the criteria found in the Gawler Public Library Collection Management Policy.

Library Use

Checked on Nielsen _____

ISBN _____ Price _____

Date ordered _____ Source _____

Hold request placed on order Yes No Date _____

Note added to customer account Yes No Date _____

If not ordered, reasons for rejection of suggestion _____
