



Questions?

Email: KTB@ks.gov

Phone: (620) 341-6280 or (800) 362-0699

Online at: kslib.info/talking-books

APPLICATION FOR TALKING BOOKS LIBRARY SERVICES

Applicant's Name:		Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	
Street:			
City:	State: KS	Zip:	County:
Telephone:		Date of Birth:	
Email Address:			
Others that are authorized to contact us/order books on your behalf:			
Contact person:		Telephone:	
By law, preference in lending of books and equipment is given to veterans.			
<input type="checkbox"/> Please check if you have been honorably discharged from the U.S. Armed Forces.			
Please have a doctor, nurse, optometrist, social worker, counselor, teacher, librarian or other qualified professional complete this entire section (See Certifying Authority)			
Eligibility criteria include: (Check only one)	<input type="checkbox"/> Blindness/Visual Impairment <input type="checkbox"/> Deaf and Blind <input type="checkbox"/> Physical Impairment (which prevents holding a book) <input type="checkbox"/> Reading Disability		*Only doctors of medicine or osteopathy can certify reading disability. All certifications will be verified.
Does the applicant also have a hearing impairment?	<input type="checkbox"/> Moderate (some hearing loss) <input type="checkbox"/> Profound (cannot hear/understand speech)		
Certification of Eligibility			
I certify that the applicant named (above) has requested library services and is unable to read or use standard printed material for the reason indicated above. (Please print or type)			
Certifying Authority's Name:			
Title and Occupation:			
Address			
Telephone:			
Signature:		Date:	

Language:	<input type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> Other _____	
Services Requested:	<input type="checkbox"/> Audio <input type="checkbox"/> Please send information about BARD (Braille & Audio Reading Download) <input type="checkbox"/> Reading materials in Braille	
Playback Equipment and Accessories		
Player Selection: (choose one)	<input type="checkbox"/> Basic—allows for listening to books & magazines	<input type="checkbox"/> I have my own NLS authorized device
	<input type="checkbox"/> Enhanced—allows for navigation by chapters/ bookmarks	
Accessories:	<input type="checkbox"/> Headphones (only for use where speakers are not permitted)	
	<input type="checkbox"/> Pillow “speaker” (issued solely to readers confined to bed)	
Book Selection		
I do not wish to receive books that contain:	<input type="checkbox"/> Violence <input type="checkbox"/> Sex <input type="checkbox"/> Strong Language	
Select one of the following:	<input type="checkbox"/> Please select books for me in the categories checked below. <input type="checkbox"/> I will select titles from Talking Books catalogs and/or online services. <input type="checkbox"/> I will download my own materials.	
Reading Preferences of Applicant: (check all that apply) To best serve you, some suggested subjects are listed below. <input type="checkbox"/> Animals <input type="checkbox"/> Christian Fiction <input type="checkbox"/> Historical Fiction <input type="checkbox"/> Mystery <input type="checkbox"/> Science Fiction <input type="checkbox"/> Biographies <input type="checkbox"/> Clean Reads <input type="checkbox"/> History <input type="checkbox"/> Romance <input type="checkbox"/> Western		
Favorite Author(s) and/or Subject(s):		

To return application, fold and secure, so that the Library’s address shows on the outside.



Kansas Talking Books—Box 4055
Emporia State University
1 Kellogg Circle
Emporia KS 66801-5415

1st Class Stamp

Statement of Confidentiality/Waiver

In accordance with authorizations in Kansas law, the personal information provided in this completed form will be held in confidence by the Kansas Talking Book Service and will not be available for examination by individuals, institutions or government agencies outside the network. You may periodically receive calls to rate your service satisfaction with Talking Books. The information on this application may only be shared with the applicant or the person identified as “contact person.”

Eligibility of Blind and Other Physically Handicapped Persons for Loan of Library Materials

The following persons are eligible for loan services:

1. Legally blind persons.
2. Other physically handicapped persons as follows:
 - a. Persons whose visual disability, with correction, prevents the reading of standard printed material.
 - b. Persons unable to read or unable to use standard printed materials as a result of physical limitations.
 - c. Persons having a reading disability resulting from organic dysfunction and of sufficient severity to prevent their reading printed material in a normal manner.

Certifying Authority:

1. In cases of blindness, visual impairment, or physical limitations, “competent authority” is defined to include doctors of medicine; doctors of osteopathy; ophthalmologists; optometrists; registered nurses; therapists; professional staff of hospitals, institutions, and public or private welfare agencies (e.g., social workers, case workers, counselors, rehabilitation teachers and superintendents). In the absence of any of these, certification may be made by professional librarians or by any person whose competence under specific circumstances is acceptable to the Library of Congress.
2. In the case of reading disability from organic dysfunction, “competent authority” is defined as doctors of medicine and doctors of osteopathy who may consult with colleagues in associated disciplines.

Qualified readers must be residents of the United States, including territories, and the District of Columbia, or American citizens domiciled abroad.

Return of Equipment

Playback equipment and special attachments are supplied to eligible persons on extended loan. If the loaned equipment is not being used in conjunction with recorded reading material provided by the Library of Congress, it must be returned to the loaning library.

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