

## SCCLD Application for Homebound Services

*This is a confidential application. Please read and complete this form.*

Please call 1-800-286-1991, Monday-Friday 8:30 a.m. - 5:00 p.m., excluding holidays, for more information about this application or homebound services.

Applicant Name: \_\_\_\_\_ Date: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

SCCLD Library Card Number: \_\_\_\_\_

### Emergency Contact Information

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

### Statement of Responsibility

I certify that my physical or medical condition prevents me from visiting the library.

- My situation is permanent
- My situation is temporary and will change approximately \_\_\_\_\_

I give SCCLD permission to notify the Emergency Contact identified above if a library staff member is not able to reach me (circle one):           **YES**           **NO**

I give SCCLD permission to keep a record of my reading interests and list of library materials I borrow. This information shall remain confidential.

Signature: \_\_\_\_\_

## **For Staff Use Only**

## **Library Materials Requested**

How many items would you like to receive per delivery? Select one:

- 1-5 items**
- 6-10 items**
- 11-15 items**
- 16-20 items**
- 20+ items**

### **Item Types**

List your favorite authors and/or actors: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List the types of material you don't like to read, watch or listen to. Check all that apply:

- Sexual content**
- Violent content**
- Content containing graphic language**
- Other (please explain)** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What type of items do you prefer? Check all that apply:

- Music CDs**
- DVDs**
- Regular Print**
- Large Print**
- Audio books**
- Paperbacks**
- Playaways**

### **Interests**

What genres are you interested in? Check all that apply:

- New Releases/Bestsellers**
- Romance**
- Mystery**
- Science Fiction**
- Nonfiction**

- Westerns**
- Biographies**
- Classics**
- Fantasy**
- Historical Fiction**

## **Music**

What types of music are you interested in? Check all that apply:

- Jazz**
- Musicals**
- Rock**
- Popular**
- Opera**
- Classical**
- World Music**
- Religious**
- Other** \_\_\_\_\_

## **Movies/Television**

What types of movies or television shows are you interested in? Check all that apply:

- Action**
- Classics**
- Comedy**
- Drama**
- Family**
- Horror**
- Nonfiction**
- Mystery**
- Musicals**
- New Releases**
- Science Fiction**
- Television series**
- Western**

# SCCLD Application for Library Designated Borrower

*This is a confidential application. Please read and complete this form.*

Applicants who live in the Santa Clara County District service area are also eligible to apply for an eCard, which provides access to online library resources. Government issued ID for the applicant and designee must be presented to apply for services.

Please call 1-800-286-1991, Monday-Friday 8:30 a.m. - 5:00 p.m., if there are questions.

Applicant/Card Holder Name: \_\_\_\_\_ Date: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Circle preference for receiving notices of hold and overdue items? **Email**      **or**      **Phone**

- I have a SCCLD Library Card Number: 23305 \_\_\_\_\_
- I need a new or replacement SCCLD Library Card.

**Library Designee:** I authorize \_\_\_\_\_ to:

- Register me for a library card or get a replacement card for me.
- Borrow materials on my behalf.

## Statement of Responsibility:

I certify that my physical or medical condition prevents me from visiting the library.

- My situation is permanent
- My situation is temporary and will change approximately \_\_\_\_\_

I give SCCLD permission to discuss information about my account, including items borrowed, with my designee until such time as I notify the library (circle one):      **YES**      **NO**

I understand that my designee must bring my library card, or show their ID, to borrow materials and that I am responsible for making sure that materials are returned on my behalf. Items returned on time and in good condition are free.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Application may be emailed to [Circ@sccl.org](mailto:Circ@sccl.org). Library staff will need to verify ID and address information for the applicant. An individual may revoke designee privileges at any time by notifying their local library directly or contacting the Circulation office at 800-286-1991 or [circ@sccl.org](mailto:circ@sccl.org).

**Designee Agreement:**

I agree to use the applicant's SCCLD library card only to borrow materials for the applicant. I understand that I need to present the applicant's library card, or my ID, each time I borrow materials and that my name will be recorded in the applicant's library record.

ID needs to be presented at the time of application and the name will be recorded in the account.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## **For Staff:**

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If the designee has the homebound person's ID, but not completed application, staff may issue a limited card valid for 2 months. Give the designee the application and ask them to return it within that time. Change the account expiration date to 2 months and note that in the Activity Log.

If the designee has the completed application, create a full-use Horizon account, after verifying ID:

- If the applicant has noted that it's ok to share account info with the designee, add an Internal Message block stating the following:  
XX-initials Homebound patron: (designee name) is authorized to access account info.
- In the Activity Log, note the name of the designee and whether or not this person is authorized to access account info.
- Send the completed application to SSC – Circ Office. Circ office staff will send a letter to the homebound patron welcoming them to the library and reiterating the designee agreement. The letter will also serve as another form of address verification. Completed applications will be filed at SSC.