



# Library Cards for All

## Library Card Subsidy Application Form

*Applicants are accepted and cards issued on a first come, first served basis based on current availability of funds.*

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

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Name(s) of children and schools attended by children in your household:

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

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

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

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

### FINANCIAL

#### School District Verification of Eligibility for TANF:

As an authorized representative of School District 4, I verify the eligibility of the family of the applicant \_\_\_\_\_ for TANF for school year 2018-2019 and as Principal of \_\_\_\_\_ School, I recommend this family for inclusion in the *Library Cards for All* program.

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

*(Please print)*

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

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

(continued on next page)

## **APPLICANT**

Complete this form and return it with the requested property tax or rental documents to the Guest Services desk at the Addison Public Library.

## **LIBRARY CARD COST CALCULATION**

Please bring:

Your current rental/lease agreement, indicating clearly your monthly payment

**OR**

Your most recent property tax bill, if a homeowner

**AND**

Two forms of identification, one of which must contain the applicant's current legal name and address

Your application cannot be completed without this information. Illinois State Law requires this information as the basis for determining the mandated annual cost we must charge a household for a library card in areas currently unserved by a public library.

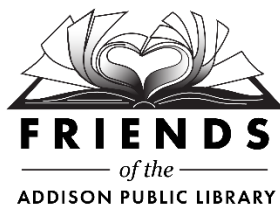
This information will determine the level of funding needed to cover the cost of one year of library privileges for your family, if your application is approved.

## **Questions?**

If you have any questions, please contact:

Jenny Cuevas, Head of Guest Services  
630.458.3326.

This subsidy is financed by the Friends of the Addison Public Library.



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## **LIBRARY USE ONLY**

Date Application Received:

Verification of Financial Information:

Cost: