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## L. E. SMOOT MEMORIAL LIBRARY

9533 Kings Highway  
King George, Va. 22485

Phone: 540-775-2147  
Fax: 540-775-3769  
[www.smoot.org](http://www.smoot.org)

### Educator Express Request Form

*\*Please note that Educator Express services require the requesting educator  
has a valid L.E. Smoot Memorial Library card in good standing\**

Today's Date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

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

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

Grade: \_\_\_\_\_ Name of Course: \_\_\_\_\_

Please use this space to explain the resources you need, including reading level, subject matter, specific materials or material types, etc.

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When would you like to pick your materials up? (Please allow at least one week from request date)

\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

***This form may be returned to the Library Circulation Desk or emailed to [YSL1@smoot.org](mailto:YSL1@smoot.org)***

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#### ***Office Use Only***

Date Request Received: \_\_\_\_\_

Date of Confirmation via Email or Phone: \_\_\_\_\_

Staff Member Selecting Materials: \_\_\_\_\_

Number of Materials Loaned: \_\_\_\_\_

Other Notes: