

**APPENDIX E**  
**Request Form for Patron Contact List Report**

**POLICY 1060**

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**Name of Library Manager/Director:** \_\_\_\_\_

**Library name:** \_\_\_\_\_

**Date of request:** \_\_\_\_\_

Describe your project and why patron contact information from the automated library system is required:

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How will you be contacting patrons:

- Phone
- Mail
- In person

Please write (or attach) the message/information that you are proposing to communicate to patrons:

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**Parameters of report:**

Note: You will receive a list of patrons by their official language of choice preference by default. You can only receive a list of patrons for your library.

Please indicate which patron type you want included in your report:

- Adult
- Juvenile
- Educator
- Other (please specify): \_\_\_\_\_

Please indicate which contact information you want in your report:

- Mailing address
- Telephone number

Date patron contact list is needed by:

\_\_\_\_\_

I understand and agree to the following responsibilities of use upon receiving the patron contact list report:

- ✓ I am accountable for the use of patron contact lists and this applies to any library or library board initiatives.
- ✓ I will manage the patron contact list as confidential information and will not share the list with external organizations or individuals, including my library board or municipality.
- ✓ I will contact patrons according to their official language of choice.
- ✓ I will not reuse the patron contact list for another purpose and will destroy the list within one month after the project is completed.
- ✓ I will always give patrons the option to not be contacted in my communication and will respect their wishes by ensuring this information is entered in the patron's profile.
- ✓ I will ensure library staff understand the confidential use of patron contact lists, their limited retention and the importance of entering patron requests for no further contact in the automated library system, under the patron's profile.

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Note: For standards relating to contacting patrons by email, see NBPLS Policy 1094 – Canada’s Anti-Spam Legislation.

Signature of Library Manager/Director: \_\_\_\_\_

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

This request has been reviewed and approved by the Regional Director:

Yes

No

Signature of Regional Director: \_\_\_\_\_

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