



Certification for Entry into the **Books To You** Program

Patron's name and address: _____

Patron's date of birth _____

Patron's contact phone number or/and email: _____

I certify the person named above has a medical condition such that there exists a normal inability to leave home and, consequently, leaving home requires assistance and a considerable and taxing effort.

I also certify that the person named above requires Large Print reading materials, in accordance with Para. 1.3c(1), Section E040 of the Domestic Mail Manual (copy attached). This is due to the person "having a visual disability, with correction and regardless of optical measurement* that renders them unable to read or use conventional printed material because of impaired eyesight OR other physical factors."

* "Regardless of optic measurement" means that, unlike the Talking Book Library Program, recipients of Large Print Books DO NOT have to qualify as "legally blind" under the criteria in Para. 1.3b (Vision no better than 20/200 by optic measurement).

Instead, Large Print readers qualify under Para.1.3c(1) which simply requires the reader to have a visual disability that prevents reading standard size (newspaper-size) print.

Printed name of certifying competent authority _____

Work phone number and email _____

Signature of certifying competent authority _____

Professional title/degree _____

Relationship to patron/agency represented _____

Date signed _____

Who may certify this document: In cases of blindness, visual impairment, or physical limitations, "competent authority" is defined to include:

- Physicians
- Ophthalmologists
- Optometrists
- Registered nurses
- Therapists
- Professional staff of hospitals, institutions, and public or private welfare agencies
- Social workers
- Caseworkers
- Counselors
- Rehabilitation teachers and/or superintendents
- Recreation and Activity staff who hold a professional degree.