



**BALTIMORE COUNTY
PUBLIC LIBRARY**

Certification of Eligibility

Certification allows the library to ship materials to customers. This section is to be completed by a healthcare professional or professional caregiver (doctor, registered nurse, therapist, counselor, rehabilitation staff, case worker, social worker).

Library by Mail Applicant Full Name: _____

**I certify that the above-named applicant is homebound and is unable to visit
Baltimore County Public Library branches.**

Name of Healthcare Professional/Professional Caregiver: _____

Title/Occupation: _____

Agency Address: _____

Phone: _____

Certifier Signature: _____

Date: _____

**Mail application to:
Adult and Community Engagement Department
320 York Road
Towson, Maryland 21204**



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