



Library Recommendation Form

We'd like to help you bring our resources to your library! Please use this form to recommend our digital resources to your institution. Simply complete the information below and send this form to your librarian.

Your Personal Details

Your Title:

Your Full Name*:

Your Email*:

Your Position

Your Department*:

Recommendation

Recommended Product:

Reasons for Recommendation*:

Additional Products:

Next Steps

Please save this form and forward it to your librarian so they can contact us to set up a free trial or receive more information to purchase this resource for your institution.

Thank you for your recommendation!