**Brodart**

**K-12 Schools Profile**

NOTE: After completing this profile, please submit it to profile@brodart.com.

|  |  |
| --- | --- |
| School Name |  |
| Contact Name |  |
| Phone |  |
| Email (school) |  |
| Date |  |
| Purchase Order Number, if required |  |
| Do Not Exceed $, if required |  |

Bill To:

|  |  |
| --- | --- |
| School Name |  |
| Address Line 1 |  |
| Address Line 2 |  |
| City/State/Zip |  |

Ship To (if different from Bill To):

|  |  |
| --- | --- |
| School Name |  |
| Address Line 1 |  |
| Address Line 2 |  |
| City/State/Zip |  |

Does your school require a paper copy/official Does your school purchase order to be sent to Brodart?


## **Tax Exempt** – please provide your TAX-EXEMPT number

Tax Exempt Number:

Email tax exempt certificate to profile@brodart.com

 Integrated library system

 

## **types of materials you will be ordering**

****

## **book processing**

****

 ****

Note: Other processing options available upon request. Please contact your Brodart Customer Care Associate for more details, availability and pricing.

**NOTE:** Account will be setup to do a first shipment and one subsequent shipment for each order that is placed.

## **jackets**

1. Do you require book jacket covers?

   

## **barcodes**

1. Do you want a **barcode label** applied to your books**?**

If yes, please complete the following questions

1. Which type of barcode do you require?

 

 

 

 

 

 

 

1. Please select the barcode style you would like below:



 





 

 School or Library name that should be printed on the barcode label:  (up to 30 characters, including spaces)

1. Please provide a barcode range for Brodart to use:

 Starting number:  Ending number: 

1. Barcode placement on book
2. Orientation of the barcode on the book







1. Where should the barcode be applied to the book?













## **spine labels**

1. Do you want Brodart to provide you with a **spine label**?

If yes, please answer the following questions:

**2**. Call number questions:

1. Include punctuation in your cutter?

1. Include spaces in your cutter? (example - De Paola)
2. Do you want 8 or 9 characters printed horizontally on the spine label? 
3. Do you expand your cutter to include multiple words of the title main entry?



1. What is the capitalization standard for your cutter (author’s last name or first word of the title)?

 All Upper Case letters

 All Lower Case letters

 Original Case letters

 First letter in uppercase only

How should your call number be stacked on the spine label?

 First three numbers and decimal on line 1; remaining numbers on line 2 First three numbers on line 1; decimal and remaining numbers on line 2 Standard stacking of up to 8 numbers per line including decimal; remaining numbers wrap to next line depending on truncation selection Wrap after decimal if greater than 8 or 9 positions

 Wrap with decimal if greater than 8 or 9 positions

1. Dewey numbers should cut at \_\_\_\_ positions past the decimal.
2. Cutters (author’s last name or first word of the title) – please fill in number of characters in the chart on the following page. Enter ‘0’ for any items you do not require.

Prefixes – if you require a specific prefix for a collection, please indicate below. We will print each prefix on a separate line on the spine label unless indicated otherwise in the chart below.

 **Collection Cutter length Prefix, if any**

|  |  |  |
| --- | --- | --- |
| **EXAMPLE: BOARDBOOK** | **3** | **BB** |
| COLLECTIVE BIOGRAPHY |  |  |
| EASY READER FICTION |  |  |
| EASY READER NONFICTION |  |  |
| GRAPHIC NOVELS |  |  |
| GRAPHIC NONFICTION |  |  |
| INDIVIDUAL BIOGRAPHY |  |  |
| JUVENILE FICTION |  |  |
| JUVENILE NONFICTION |  |  |
| PICTURE BOOK FICTION |  |  |
| PICTURE BOOK NONFIC |  |  |
| REFERENCE |  |  |
| SHORT STORIES |  |  |
| SPANISH |  |  |
| YOUNG ADULT FICTION |  |  |
| YOUNG ADULT NONFICTION |  |  |

**Other options are available. Please contact your Brodart Customer Care associate for details.**

h. Where should the spine label be applied to the book?

 ¾ inch from the bottom of the spine.

 Flush with the bottom of the spine.

 Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## **paperback reinforcement**

 Please indicate below if you would like your paperback covered or converted.

 (clear laminate applied to cover)

 (Converts softcover into hardcover book)

## **reading programs LABELS**

 Do you want reading program labels applied to your book above the spine label?

 ****

Which reading program labels?

 ****

 ****

 ****

## **marc records**

 



 If you selected **Records with call number and barcode data**, please complete the table below.

 **Item Holding Record Content**

 **User-defined holdings tag - MARC tag number: **

*Please specify subfields and data required for each subfield in the chart below.(Some of the most commonly used are listed below. Add more as necessary*

*for your ILS)*

\*indicates that information must be provided in the order when placed by the customer

Data Required Subfield Subfield Sequence

Barcode $

Branch Code\* $

Call number $

Collection Code\* $

List Price $

Item Type\* $

Fund Code\* $

EDI Match Point\* $

Bibliographic Number\* $

Acq/Item Number\* $

Other $

Other $

MARC records will be emailed. Please provide the email address below.



## **reading program data in marc record**

Do you want reading program data included in the 526 tag of the MaRC record? If so, which one?

 ****

 ****

 ****

 Do you require Lexile data in your MARC records?

 ****

## **reports**

 Brodart will provide cancellation and title status reports on a monthly basis. Please indicate below the email address where these .pdf documents should be sent.

 

## **COmments**

Please enter any specific cataloging or processing specifications below that have not been covered in any of the above areas. A Customer Care associate will review these requests and let you know if they are available.

