



National Housing Trust

INFORMATION RESOURCE CENTRE

USER REQUEST FORM

Customer's Name _____ Date: _____

Tel#: _____ Fax: _____ Email: _____

Student () Private Researcher () Inter-Library ()

Name of Business/Institution: _____

Information Requested _____

Sources Used: _____

Service Provided	Adequacy of Sources Supplied
() Excellent	() Excellent
() Very Good	() Very Good
() Satisfactory	() Satisfactory
() Fair	() Fair
() Poor	() Poor

Comments: _____
