

**REQUEST FOR WAIVER OF LORI STANDARDS  
FOR RHODE ISLAND LIBRARIES**

Please complete and submit a form for each standard. After processing,  
a copy will be returned to the library for your records.

LORI Code (3-letter): \_\_\_\_\_

Name of library: \_\_\_\_\_

We hereby request a waiver of the following standard: \_\_\_\_\_

Reason: (Please attach any additional supporting documentation)

Action which will be taken to comply with this standard:

Projected date for compliance with this standard\*: \_\_\_\_\_

\*Date must not be more than one year from the waiver request date.

Signature of Director/Librarian \_\_\_\_\_ Date: \_\_\_\_\_

**This section to be completed by OLIS**

LORI Standard Number \_\_\_\_\_

Waiver granted until (date): \_\_\_\_\_

Waiver denied (date): \_\_\_\_\_

Explanation:

Chief of Library Services \_\_\_\_\_ Date: \_\_\_\_\_

**To be completed for appeal filing with the Library Board of Rhode Island.**

Action taken by the Library Board of Rhode Island:

Date: \_\_\_\_\_