

Subject Request Form

PAHKISIMON NUYEᐱÁH LIBRARY SYSTEM

Bag Service 6600
La Ronge, SK
S0J 1L0

Phone: 306-425-4525
Fax: 306-425-4572

E-mail: pnlsoffice@pnls.lib.sk.ca



Check level of information required: General interest ___ Research ___ Teaching, Level ___ School, Grade ___ University ___ Other (please specify) _____	
Information wanted:	Date required by: _____ Will accept later: _____
<i>If wanting a CLASS Set please indicate number needed and if Guide is also required.</i>	
Check out Pahnkisimon.ca (for class set, teacher resource titles, etc.)	
Library or School:	
Name:	Barcode:
Address:	
Postal code:	
Telephone: (Work)	(Home/Cell)

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