

Add New PDA/DDA E-Book Vendor

Institution: _____ Date: _____

Campus: _____

Name of individual completing form: _____

Phone: _____ Email: _____

Instructions: Complete the information below. Contact the vendor **before** submitting this form to ensure they are able to meet **all** of the following requirements:

- Provide MARC records
- Each record must have at least one \$856 field with a URL that points to one unique source
- Provide an FTP site where MARC records can be retrieved
- Email loadfiles@flvc.org when records are ready to be downloaded
- Signify by email which institution the MARC records are for and that the records are for PDA

**** Complete ALL fields before submitting this form****

PDA vendor name: _____

PDA vendor contact information: _____

FTP or URL to retrieve MARC records: _____

Login information (username/password) for vendor site: _____

Email address of the person to be notified when records have been loaded: _____

Format type (e.g., eBooks, books, eVideo, video): _____

FORM SUBMISSION INSTRUCTIONS

Step 1: Initial Requestor

Send the completed form to your Institution Contact for review and approval. The form will be delivered by email as a PDF attachment.

Institution Contact Email: _____

Step 2: Institution Contact

Enter your name below to indicate approval and submit the form to the Help Desk. Note: The form must be sent from the email address on file for the Institution Contact.

Institution Contact Name: _____