

Town of Granby Department of Library Services

Statement of Concern: Library Resource

Please complete this form if you are lodging a concern regarding a library resource. (Note: Library resources may be in any format. *Only one resource per form may be listed*.

Upon completion, the form will be given to the Library Director who will review your submission in conjunction with Library staff and the Library's materials selection, collection development, and/or Internet access policies. A written response will be mailed to you as soon as is reasonably possible, usually within two weeks.

If you are not satisfied with the decision of the Library Director, you have the option of requesting in writing that your submission be presented to the Granby Library Board (Board). This request must be submitted to the Board within two weeks of your receipt of the first decision. Upon presentation to the Board, a written response will be sent to you as soon as is reasonably possible after the next meeting of the Board, usually within two weeks.

Date:				
Name:				
Address:				
Telephone:				
Email:				
Do you represent a particular organization or group	p in this concern? If so, please identify:			
Please supply the following information, as applicable, on the resource of concern:				
Title:				
Author:				
Format (book, magazine, video, audiotape, music, etc.):				
Publisher:	Publication Date:			

Have you read / viewed / listened to the work in its entirety? If not, how much of the work have you read / viewed / listened to? How recently?
Please specify what passage or aspect of the item to which you take exception. Please be specific as possible and include citations when possible:
Please explain or describe how this passage/aspect was brought to your attention:
Please explain the theme, intent, or focus of this particular work in your own words. Please be as specific as possible.
What do you think would be the result of reading / viewing / listening to this particular work? Please explain in detail.

Did you consult any published review recall.	vs concernin	g this work?	If so, please list as	many as you
What action would you recommend in detail.	to the Librar	y so as to pro	ovide a resolution?	Please explain
Signature			Date	_
Your signature indicates that the opinio the information provided in this form h ind	as been prov	-	any influence or guid	
Staff Use:				
Received on	by	Staff Name		
Received by the Library Director on _	Date			
Reviewed by the Library Director on	Date	and resp	oonse mailed on	 Date