

Request for Review by the Board Form

THIS FORM MUST BE COMPLETELY FILLED OUT AND SIGNED TO BE REVIEWED.

Complainant information:

Name _____

Address _____

Phone number _____

Email address _____

Complainant represents: _____ himself/herself OR _____ name of organization

Please state your concern, describing to what item, program, or display you are objecting.

Why are you objecting?

In its place, what would you recommend that would convey as valuable a picture and perspective of the subject treated?

How do you think the Library Board and Staff should address this issue?

Signed _____ Date _____