

Statement of Concern about Library Resources

This form may be used to express concern regarding the library collection, programs, displays/exhibits, or meeting rooms. Concerns will be dealt with promptly and courteously.

Statement of Concern about Library Resources

Please complete this form and return it to:

Atchison Public Library

401 Kansas Ave.

Atchison, KS 66002

Or email director: jslingsby@atchisonlibrary.org

Today's Date _____

Name of Individual or Group _____

Contact Person _____

Phone _____ Email _____

Address _____

City _____ State _____ Zip Code _____

1. Resource of concern:

- a. Book or Magazine
- b. Video/DVD
- c. Audio recording/CD
- d. Electronic information
- e. Library program
- f. Display/exhibit
- g. Meeting room
- h. Other (please explain) _____

Resource description: (title, author, artist, program name, etc)

2. Have you (please select all that apply):
- a. Read the Book or Magazine
 - b. Viewed the Video/DVD
 - c. Listened to the Audio recording/CD
 - d. Viewed the Electronic information
 - e. Attended the Library program
 - f. Viewed the Display/exhibit
 - g. Attended the Meeting
 - h. Other
3. How did you find out about the resource(s)?
4. What are your concerns about the resources(s)?
5. What action do you seek as a result of your concern?