

Contact Information

Name: _____ Date: _____
 Street: _____ Phone: _____
 City, State, ZIP: _____ E-mail: _____
 Do you represent a group? _____ If so, name of group: _____

Resource Information

Resource that concerns you:

<input type="checkbox"/> Book	<input type="checkbox"/> Library Program	<input type="checkbox"/> Display
<input type="checkbox"/> Magazine	<input type="checkbox"/> Audio Recording	<input type="checkbox"/> Video/DVD
<input type="checkbox"/> Newspaper	<input type="checkbox"/> Electronic Resource/Web Site (please specify): _____	
<input type="checkbox"/> Other (please specify): _____		

Title/URL: _____
 Author/Producer: _____

Requested Action

<input type="checkbox"/> Add it to the Library	<input type="checkbox"/> Shelf it elsewhere	<input type="checkbox"/> Remove it from the Library
<input type="checkbox"/> Other (please specify): _____		

Please explain how such an action would improve the Library's service to the community:

Details

Use the back of this paper if necessary to answer the following questions:

What in the work do you object to? Please be specific and cite pages if applicable.

Did you review the entire work? If not, then which parts?

In what way does this item violate the GFP Collection Development Policy?

Additional comments:

Signature

Signature _____ Date _____

Note: You will receive a written response to this request from the committee within 90 days. After receiving the response, if you feel your views have not been adequately considered or that the committee has not taken sufficient or correct action, you may appeal the decision in writing to the Library Director (2110 Library Circle, Grand Forks, ND 58201) within 30 days of receipt of the committee's decision.