

Statement of Concern About Library Resources

Rio Communities Public Library

Name _____ Date _____

Address _____ Phone _____

City _____ State _____ ZIP _____

Resource on which you are commenting:

Book Audio-visual Resource
 Magazine Content of Library Program
 Newspaper Other _____

Title: _____

Author/Publisher or Producer/Date: _____

1. What brought this resource to your attention? _____

2. To what do you object? Please be as specific as possible. _____

3. Have you read or listened or viewed the entire content? If not, what parts? _____

4. What do you feel the effect of the material might be? _____

5. For what age group would you recommend this material? _____

6. In its place, what material of equal or better quality would you recommend? _____

7. What do you want the library to do with this material? _____

8. Additional comments: _____
