

Request for Review and Reconsideration of Goffstown Library Policy

I, \_\_\_\_\_, request the Library Director to review and reconsider the policy which pertains to \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The change I would like considered is \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reason for request? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I am a Goffstown resident and/or Goffstown Public Library cardholder. To discuss this concern I can be reached:

day phone: \_\_\_\_\_  
night phone: \_\_\_\_\_  
or by email at: \_\_\_\_\_

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Form received at GPL by: staff name \_\_\_\_\_ ON: date \_\_\_\_\_

Contact to concerned cardholder by: Director \_\_\_\_\_ ON: date \_\_\_\_\_

(Second attempt at contact if first attempt unsuccessful: on: date \_\_\_\_\_)

Date of Resolution: \_\_\_\_\_

- Cardholder satisfied with Director's determination; no further review necessary
- Cardholder unsatisfied with Director's determination; referred to Library Board of Trustees
- Director's referral to Library Board of Trustees
  - Date of resolution by Library Board of Trustees: \_\_\_\_\_
  - Date of notification to resident: \_\_\_\_\_