UINTAH COUNTY LIBRARY

STATEMENT OF CONCERN ABOUT LIBRARY RESOURCES

All fields are required for this form to be considered complete and accepted.

Before completing this form, please confirm that you have spoken with one of our staff members about your concerns by noting their name and the date you spoke with them.

Staff Member: _____ Date: _____

CONTACT INFORMATION

Full Name: _____ Date: _____

Phone Number: _____ E-Mail: _____

Address: _____ City/State/Zip: _____

LIBRARY RESOURCE INFORMATION

Resource on which you are commenting:

- ☐ Book
- ☐ Magazine
- ☐ Content of Library Program
- ☐ Audio-Visual Resource
- ☐ Newspaper
- ☐ Other

Title: _____

Author/Publisher or Producer/Date: _____

Have you read or listened to or viewed the entire content? ☐ Yes ☐ No

More Information :
204 East 100 North, Vernal, UT 84078
435-789-0091
library.uintah.gov

THANK YOU

Form adopted by the Uintah County Library Board of Directors August 30, 2024.

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STATEMENT OF CONCERN
ABOUT LIBRARY RESOURCES

All fields are required for this form to be considered complete and accepted.

1. What brought this resource to your attention?

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

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

4. In its place, what material of similar content would you recommend?

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