

STATEMENT OF CONCERN ABOUT LIBRARY RESOURCES

Per our Collection Development Policy, all fields are required for this form to be considered complete and accepted.

Have you spoken with a staff member about your concerns? ☐ Yes ☐ No

If so, please provide their name if known (or "unknown" if not) 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



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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?

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 September 20, 2024.