

Collection Complaint Form

The Bell Memorial Library Board of Trustees has delegated the responsibility of selection and evaluation of library resources to the staff of the Bell Memorial Library and has an established procedure to address patron concerns about those resources. Completion of this form is the first step in this procedure.

Please tell us about the library material you believe was selected for our collection in error.

Author:

Title:

Publication Date: _____. Format (Book, DVD, CD, etc.): _____

1. What brought this material to your attention:
2. What concerns you about this material? Please be as specific as possible.
3. Have you examined the material in its entirety? If not, what parts were examined?
4. What would you like the library to do about this material?

If you wish to remain anonymous, do not fill in the following section. Instead, submit the form as directed below. Please note that anonymous complaints cannot receive a follow-up from the Library.

Name of person and name of organization if applicable:

Address:

Phone:

Signature:

Date: _____; Please submit your completed form in a sealed envelope addressed to: Bell Memorial Library, c/o Library Manager, P. O. Box 725, Nunda, NY 14517.

Library Manager review:

Library Board of Trustees review:

Library Board decision:

*Notification will be given to patron of decision made.

ADOPTED: 3/17/1995 REVISED: 10/22/2020 REVISED: 3/20/2025