

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: _____