

## Rochester Hills Public Library Statement of Concern Regarding Library Resources

The Board of Trustees of the Rochester Hills Public Library has authorized the use of this form as part of its *Reconsideration of Library Materials* policy. Completed forms should be returned to: Library Director, Rochester Hills Public Library, 500 Olde Towne Road, Rochester, MI 48307. Submitters will be notified in writing regarding the decision of the library board, typically within three months.

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_

Citizen represents: \_\_\_ Self

\_\_\_ Organization: \_\_\_\_\_

Title of Item: \_\_\_\_\_

Author: \_\_\_\_\_

Format (e.g., book, CD, DVD): \_\_\_\_\_

Did you read, view or listen to the entire work? \_\_\_\_\_

What concerns you about this material? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_