



Patron Complaint Form

This form must be filled out completely

The Pottstown Regional Public Library requires that all complaints or requests for reconsideration of circulation materials be submitted in writing. Completion of this form is the first step in that procedure. If you wish to request reconsideration of a resource, or lodge a complaint, please return the completed form to the library director.

Pottstown Regional Public Library (PRPL)
500 E. High Street
Pottstown, PA 19464

Date _____

Name _____

Address _____ City _____ State/Zip _____

Phone _____ Email _____

Do you represent yourself? Yes No Do you represent an organization? Yes No

If you represent an organization what is the Name of Organization _____

Are you a PRPL Cardholder? Yes No

If you are not a PRPL Cardholder, please list the name of any public library for which you are a cardholder:

Please answer the following questions to the best of your ability. If the question does not apply to your concern, please enter "N/A"

1. Resource on which you are commenting:

Book (e-book) Movie Magazine Audio Recording Digital Resource Game Newspaper

Other, please explain: _____

Title _____

Author/Producer _____

2. What brought this resource/complaint to your attention?

3. Have you examined the entire resource? Yes No

3a. If not, what sections did you review?



4. What concerns you about the resource? Please cite direct examples from the resource.

5. Are there resource(s) you suggest to provide additional information and/or other viewpoints on this topic?

6. What action are you requesting the review committee consider?

If your concern is not regarding circulation materials, please briefly describe your complaint in the space below or on an attached sheet. If relevant, include in your description where and when the incident occurred (date and time), the full names of any Library staff or patrons involved and how they were involved, any previous efforts made by you and/or Library staff to resolve the complaint, and any other significant information.

Signature _____

Date _____

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Library Use Only

Date Received: _____ Date Reviewed: _____
Patron Contacted with resolution results: Date: _____ Notes _____