

BEDFORD PUBLIC LIBRARY MEETING ROOM APPEAL

The library's mission includes developing and maintaining the library as the cultural and meeting center of Bedford.

If you believe that you meet the guidelines outlined in the Bedford Public Library's Meeting Room Policy and that your application was not given proper consideration, you may submit an appeal.

Ask for reconsideration by the Library Director if you are not satisfied with the original decision. An appeal form must be completed and submitted requesting such action.

Ask for reconsideration by the Library Board of Trustees if you are not satisfied with the decision of the Library Director. An appeal form must be completed and submitted requesting such action.

A separate appeal form must be submitted for each of these steps. There may be a waiting period of up to thirty (30) days for each step so that sufficient time may be given for a proper evaluation of your appeal. You will be notified as soon as a decision is made regarding your appeal. In the event your appeal is denied, you will receive a written notice stating the grounds for denial.

Name	
Email	
I wish to make an appeal to the _	Library Director Library Board of Trustees
on behalf of (Enter the name of th	organization below)
in order to secure approval of pre name of the Meeting Room below	rious application for meeting room space in the (Enter the
on the date	which has been denied.

Our request meets the guidelines set Policy Yes	forth in the Bedford Public Library	's Meeting Room
Comments or additional information denied:	as to why you believe the applicat	ion was improperly
It is understood that there may be a visufficient time for proper evaluation		ays in order to allow
Official Representative of Group: *		
Name of Organization *		
Address		
Daytime Phone	Evening Phone	
Email Address		
Date		