



BEDFORD PUBLIC LIBRARY

Request for reconsideration of Bedford Public Library Program, Exhibit, or Display

Title of program, exhibit, or display: _____

Performer or artist name: _____

Request initiated by: Name: _____

Organization (if applicable): _____

Address, City, State: _____

Please describe in specific terms the basis for your objection:

What is your suggested action?

Signature of requestor Date

I am a Bedford resident. To discuss this concern I can be reached:

Day time phone: _____

Night time phone: _____

email address: _____

.....
Form received at BPL 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; information shared with Library Board of Trustees
- Cardholder dissatisfied with Director's determination; referred to Library Board of Trustees
- Director's referral to Library Board of Trustees
 - o Date of resolution by Library Board of Trustees: _____
 - o Date of notification to resident: _____

Notes:

Staff member receiving form

Date

Adopted by the Board of Trustees 05/05/2023