The Community Library Patron Complaint Form

Please complete all fields below. We will attempt to resolve your complaint quickly and fairly.

- 1. Name: ______
- 2. Address: _____
- 3. E-mail: _____
- 4. Phone #: _____
- 5. Library Patronage:
 - a. Are you a Community Library cardholder? YES NO
- 6. Please briefly explain the nature of your complaint in the space below. To the extent relevant, include in your description: the date and time of day when the incident occurred, the location in which the incident occurred, the full names of any library staff or patrons involved and the nature of their involvement, any previous efforts made by you and/or library staff to resolve the complaint, and any other significant information regarding the nature of the complaint.

Signature: _____

Date: _____

The Community Library, 110 Union St., Cobleskill, NY 12043 www.CommunityLibraryCobleskill.org