Goodnow Library Request for Review of Library Program

If you wish to request reconsideration of library resources, please return the completed form to the Director, Goodnow Library, 21 Concord Rd, Sudbury, MA 01752.

Program Title:
Program Date:
What are your specific objections to this program?
Have you read any reviews of this program or speaker? Yes No
What do you recommend be done regarding this program?
How did you become aware of this program or service? What do you know about its content and purpose? Have you attended the program (or another event with this presenter) or used the service?
What do you believe might be the result of attending this program/using this service?

Do you see any ways in which this program or service could be of value?
Please suggest alternative events or services that could provide similar information on this topic or support in this area to the community.
Additional comments:
Please tell us about yourself:
Your Name:
Street Address:
Town, State, Zip Code: Sudbury, MA 01776
Email Address:
Phone Number:
Are you representing yourself or an organization? ☐ Myself ☐ An Organization
Name of Organization:
The Library Director will review your request and inform you of the response in no later than two days before the program.