Challenges to Library Resources Date ____ your name street address city telephone e-mail address What is your relationship to Hope College? staff faculty student alumni other ____ Do you represent yourself? yes no Do you represent an organization? yes no If yes, name of organization: Resource on which you are commenting: This item is a: book textbook video display magazine audio recording newspaper library program electronic resource/network other: What brought this resource to your attention?_____ Have you examined the entire resource?_____ What concerns you about the resource?

Please return this form to Kelly Jacobsma, Dean of Libraries, Van Wylen Library, Hope College, 53 Graves Place, P. O. Box 9012, Holland, MI 49422-9012.

on this topic?

Are there resources you can suggest to provide additional information and/or other viewpoints