



## PATRON REINSTATEMENT REQUEST FORM- DRAFT

*This form applies to the Lackawanna Public Library.*

It is the responsibility of the suspended patron to initiate the reinstatement process. To request reinstatement, please complete this form in its entirety. When complete, email to [lcw@buffalolib.org](mailto:lcw@buffalolib.org), drop off at the Lackawanna Public Library, or mail to: Library Director, Lackawanna Public Library, 560 Ridge Road, Lackawanna, NY 14218.

### 1. Location in Library and Date of Incident:

### 2. Describe the incident that occurred leading to your suspension with as much detail as possible.

### 3. What could you have done differently?

**4. What could library or security staff have done differently?**

--

**5. Why should your library privileges be reinstated?**

--

**Contact Information:** *Reinstatement will not be considered without provided contact information.*

**Name:**

**Phone Number:**

**Address:**

**City:**

**State:**

**Zip:**

**Guardian Information (if applicable):**

**Guardian Name:**

**Phone Number:**

**Address:**

**City:**

**State:**

**Zip:**

It is the responsibility of the suspended patron to initiate the reinstatement process. To request reinstatement, please complete this form in its entirety. When complete, email to [lcw@buffalolib.org](mailto:lcw@buffalolib.org), drop off at the Lackawanna Public Library, or mail to: Library Director, Lackawanna Public Library, 560 Ridge Road, Lackawanna, NY 14218.