

Request for Review of Blocked Website

Please complete this form that will be used by a review committee appointed by the Executive Director of the Pueblo City-County Library District. This form must be completed in its entirety to be considered. After a determination is made regarding your request, you will be notified in writing of the library's decision.

Patron Information					
Name:				Date:	
Address:					
				phone:	
Email Address:					
Representing: □Self	□Nam	e of organization/gro	oup:		
Website Information					
Website URL:					
Website Name/Title:					
Date Access was attempt	oted:				
Library Branch / Location	n where E	Block Occurred:			
Device Used: □Public (Compute	r □Laptop/Chrome	oook □Pe	rsonal Device on Library Wifi □I	Hotspot
Filter/Block Message Sh	own (quo	te exactly if possible	e)		
What do you believe is the	he subjec	et of this website?			
Why do you feel this site	should r	ot be blocked?			
What action are you requ	uesting?	□Unblock site for	all patrons	□Unblock for adults (18+)	
Customer Signature				 Date	

Note: Send original to the Associate Director of Public Services