Suggestion Box Form

We'd Like to Hear from You!

KENT STATE UNIVERSITY
University Libraries

Date _____ Time of Visit _____

Questions, Comments, or Suggestions:
Please print

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

Your Status: *check one*

☐ Undergraduate Student ☐ Faculty ☐ Community Borrower
☐ Graduate Student ☐ Staff
☐ Other _____
please explain

Would you like to be contacted? *check one*

▶ **Yes**, please ☐ **call me** or ☐ **email me** :
_____
phone number / email address

☐ **No**, thank you

My name is _____

Please place this form in the blue Suggestion Box in the Reference Center. You may also mail this form to: **Suggestion Box, Room 182A, Kent State University Library, Kent OH 44242**, or fax this form to **(330) 672-7960, Attention: Suggestion Box, Room 182A.**

You can also fill out a University Libraries Suggestion Box Form online at:
http://www.library.kent.edu/suggestion