

REQUEST FOR RECONSIDERATION OF LIBRARY MATERIALS

Format (eg: book, movie, magazine): _____	
Title: _____	Author or Performer: _____
Publisher (if known): _____	Date Published: _____
Request initiated by: _____	Phone: _____
Address: _____	City: _____
State/Zip Code _____	Email: _____
Do you represent <input type="checkbox"/> Yourself _____	
<input type="checkbox"/> An Organization (Name) _____	
<input type="checkbox"/> Other Group (Name) _____	

1. What brought this resource to your attention? _____

2. Have you examined the entire resource? If not, what sections did you review? _____

3. In your opinion, who is the intended audience of this work? _____

4. What concerns you about this resource? _____

5. Are there resource(s) you suggest to provide additional information and/or other viewpoints on this topic? _____

6. What action are you requesting the Library to consider? _____

This form must be signed and filled out in its entirety.

Name: _____

Date: _____