



REQUEST FOR RECONSIDERATION OF LIBRARY MATERIALS FORM

Title _____ Author _____

Publisher _____ Book _____ Periodical _____ Other _____

Request initiated by _____

Address _____

City _____ State _____ Zip _____ Phone _____

Do you represent: _____ Yourself _____ An organization (name) _____

Other group (name) _____

1. To what in the work do you object? (Please be specific, cite pages, etc. Use the back of this form if necessary.)

2. Did you read, view, or listen to the entire work? _____
If no, what parts did you read, view, or listen to?

3. What do you feel might be the result of reading, viewing, or listening to this work?

4. For what age group would you recommend this work?

5. What do you believe is the theme of this work?

6. Are you aware of judgments of this work by reviewers and critics?

7. What would you like the library to do about this work?

_____ Move it to another section of the Library.

_____ Have the Library Selection Personnel in consultation with Library Board Member re-evaluate the work.

_____ Other, explain _____

8. Is there a work or works that you would recommend that would convey the perspective or subject matter in a better way?

A written reply from the library will be sent within four weeks after the return of this form.

Signature _____ Date _____