

REQUEST FOR RECONSIDERATION OF LIBRARY MATERIALS

Format: Book _____ Periodical _____ Other (Name format) _____

Title _____

Author _____ Publisher (if known) _____

Request Initiated by _____

Address _____ City _____

State/Zip Code _____ Email _____

Phone: Home _____ Work _____ Cell _____

Do you represent: [] Yourself

[] An Organization (Name) _____

[] Other Group (Name) _____

1. Did you complete the entire work? If not, what parts did you complete? _____

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

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

4. To what in the work do you object? Please be specific. Cite pages. _____

5. Why do you find this objectionable? _____

6. Are you aware of reviews of this work? If so, please cite reviews. _____

7. What action would you like the Library to take regarding this work? _____

8. Is there anything good about this work? _____

9. What would you recommend as a replacement for this work? _____

This form must be signed.

Name _____ Date _____