

Request for Reconsideration of Library Material – (once submitted and reviewed by the Library Director and Board, the complainant will receive a decision within 45 days) _____

Date

Type of Work/Resource

Please check all that apply.

- Book
- Audio Book
- DVD
- CD
- Magazine/Newspaper
- Other

Title of Work

Please tell us the title or describe the work/resource.

Author/Performer

Please reference the author or performer in question.

What brought the work/resource to your attention?

Please describe.

Please comment on the work/resource as a whole. What are your specific concerns about the work?

Please provide as much detail as possible.

What action would you request the Library to take?

Please describe and let us know why.

Are there resource(s) you would recommend to provide additional information and/or other viewpoints on this topic?

Please describe.

Your Name and/or Organization

Address

Street Address (optional)

Apt, Suite, Bldg. (optional)

City

State

▼

Postal / Zip Code

Country

Phone

Who do you represent?

- Self
- Organization