REQUEST FOR RECONSIDERATION OF LIBRARY MATERIALS

Name:					
Address:					
Phone:	one: E-mail:				
Complainant Represe	ents: Self O	organization (specify)			
Material: Book	Periodical	Electronic Resource	Media	Other	
Title:					
		Publisher:			
1. What do you object	t to in the mate	erial? (Please be specific; c	cite pages, etc)	
2. Why do you object	to the materia	al?			
3. Did you read or vie	w the material	I in its entirety?	If not, wha	at section?	
4. Is there anything go	ood about this	material?			
5. Do you think that polibrary?	eople who wa	nt to read/see this material	should be able	to find it in the	
6. What is the theme	of this materia	al?			
7. In its place, what m	naterial of equa	al quality would you recomr	mend?		

8. Do you think groups or other members of the community should have the right to keep you from having access to materials you want of which they disapprove?				
9. Are you usually able to find wh	nat you want in the library?			
10. If not, what materials would you like to be able to find in the library collection?				
Date:	Signature:			
Staff use:				
Staff member accepting form:				
Date Library Director received form:				