

## REQUEST FOR RECONSIDERATION

Please complete this form and return it to a staff member

### Your contact information

Name \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_

### (Please fill out all fields)

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_ Today's Date \_\_\_\_\_

Do you represent (check one):  yourself  an organization: \_\_\_\_\_

### What type of material are you commenting on?

Book  Video recording  Newspaper  Library program

Audiobook  Music recording  Magazine  Display/exhibit

Internet resource/site  Other \_\_\_\_\_

### What item/program are you commenting on?

If commenting on an item, what is the title and author/performer/producer?

If commenting on an program/display/exhibit, what is/was the title and date?

### How did this title/event/display/program/exhibit come to your attention?

(Recommended by staff member, review, friend's recommendation, found on shelf, visited library, library calendar announcement, publicity announcement, etc.)

### Did you read or listen to the entire work, stay for the entire program, view the entire display? If not, which selection or part did you read or view?

### What is it that you find objectionable? Please be specific; cite pages, excerpts, or scenes whenever possible.

#### Library Use Only

Received on: \_\_\_\_\_

Staff initials: \_\_\_\_\_

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Thank you for your comments. Please use the back of this page for further comments if necessary. The Library Director will contact you regarding your concerns within 60 days.