

Statement of Reconsideration

Your Name _____

Address _____

City _____

State _____ Zip Code _____

Telephone _____

Email _____

Material on which you are commenting: _____ Book _____ Video _____ Magazine
_____ Audio Recording _____ Newspaper _____ Digital _____ Other

Title _____

Author/Producer _____

1. What brought this resource to your attention?

2. Have you read/examined the entire resource?

3. What concerns you about the resource? (Use other side or additional pages if necessary)

4. Is there anything worthwhile in the material?

5. Are there resources you suggest to provide additional information and/or viewpoints on this topic? _____

6. Have you read the materials selection policy of this library, including the Library Bill of Rights and Freedom to Read statements? _____ Yes _____ No

Signature of Patron _____

Date _____

The Library Director will respond to this inquiry in writing within eight weeks of the original submission.