

Request for Reconsideration of Library Resources

Date _____

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

If you represent an organization, please specify _____

Resource on which you are commenting:

____ Book ____ Video ____ Display ____ Magazine ____ Audio Recording

____ Newspaper ____ Library Program

____ Electronic information/network (please specify) _____

____ Other (please specify) _____

Title _____

Author/Producer _____

Have you examined the entire resource? ____ Yes ____ No

If not, what parts did you read/review/listen to? _____

Please answer the following questions as thoroughly as possible. Use the back of this form and/or additional sheets as necessary.

1. What brought this resource to your attention?
2. What concerns you about the resource?
3. Are there resource(s) you suggest to provide additional information and/or other viewpoints on this topic?