

\_\_\_\_\_ for Reconsideration of Material Form

The trustees of \_\_\_\_\_ have established a materials selection policy and a procedure for gathering input about particular items. Completion of this form is the first step in that procedure. If you wish to request reconsideration of a resource, please return the completed form to the library director.

**Date**

\_\_\_\_\_

**Name**

\_\_\_\_\_

**Address**

\_\_\_\_\_

**City State/Zip**

\_\_\_\_\_

**Phone? Email**

\_\_\_\_\_

**Do you represent self or an Organization?** \_\_\_\_\_

(name of organization)

**1. Resource on which you are commenting:**

- \_\_\_\_\_ **Book (e-book)**
- \_\_\_\_\_ **Movie**
- \_\_\_\_\_ **Magazine**
- \_\_\_\_\_ **Audio Recording**
- \_\_\_\_\_ **Digital Resource**
- \_\_\_\_\_ **Game**
- \_\_\_\_\_ **Newspaper**
- \_\_\_\_\_ **Other**

**Title**

\_\_\_\_\_

**Author/Producer**

\_\_\_\_\_

**What brought this resource to your attention?**

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**Have you examined the entire resource?**

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**What concerns you about the resource?**

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

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**What action are you requesting the library consider?**

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