REQUEST FOR RECONSIDERATION OF LIBRARY MATERIAL

Sullivan County Library supports the American Library Association's Library Bill of Rights. We also value the community's right to express their concerns regarding materials that are a part of the library's collection. If there is an objection to an age-appropriate designation that has been affixed to an event, presentation or display the requesting library patron may complete this form and submit it to the Library Director.

Description of	item concerned:	
Book	Magazine/Newspaper	DVD/CD
Event	Presentation	Display
Author or Artist:		
Title:		
Publisher or Distri	ibutor:	
Event, Presentatio	on or Display:	<u> </u>
Questions abou	it the item:	
•	objectionable and/or offensive about ections (attach additional sheets if nee	this item? Please give specific examples, including eded).
Did you read/view	v/hear the entire work?	YesNo
If not, what parts	did you read/view/hear?	

Did you read any pub	lished reviews of this item?	Yes	No
If yes, please, give the	e name and date of the publication	on.	
What would you like	the library to do about this item?	?	
Do you have a recomm	mendation for an alternative to the	his item?	
•	d to your request, we need t	•	
Address:			
Telephone #: Day_		Evening	
E-mail address:			
Representing	Self Organization(nam	ne) ————	
	Other (Identify)		
Signature of perso	n submitting the Reconside	ration Form:	
			Date
Sullivan County Dubl	io Library appropiates your inter	east in the library's	callaction. This form will be

Sullivan County Public Library appreciates your interest in the library's collection. This form will be reviewed by the Director and the Board of Trustees. You will receive notification of the progress or decision of this request within thirty days from the date the form is received the results will be disclosed to the public and published.