

Request for Reconsideration of Library Materials

Date:

Author/Producer:

Publisher:

Title:

Dewey number (if any):

Date/Edition:

Type of Material:

Book Magazine/Newspaper Video/DVD/CD Electronic Database Audio/CD
 Other:

Did you read, view or listen to the entire work or a portion of the work? All Part

Please describe your concerns regarding this material (Please use additional sheets if needed):

What specific pages/sections illustrate your concerns (Please use additional sheets if needed):

How did this material come to your attention (optional) (Please use additional sheets if needed):

Contact Information

Name:

Address:

City/State/Zip Code:

Organization Represented:

Telephone / email: