

FORM II

REQUEST FOR RECONSIDERATION OF LIBRARY MATERIALS

Author: _____

Title: _____

Publisher or Distributor: _____

Request Initiated by: _____

Address: _____ Telephone: _____

City: _____ Zip code: _____

Request represents: _____ Individual

_____ Organization, list name _____

_____ other, list name _____

1. Have you read or viewed the entire work? __ yes __ no

If not, what parts? _____

2. To what in the material do you object? (Please be specific; cite pages or sections)

3. What good or valuable features do you find in the material? _____

4. What do you believe is the theme of this work? _____

What do you feel might be the result of reading or viewing this material? _____

Have you read any reviews of this material? _____

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If yes, specify: _____

Do you think this material would be more appropriate for a different age group? Please explain:

What would you like the Library to do about this material? _____

Can you recommend other material that would convey as valuable a picture and/or perspective of the subject treated? _____ If yes, please specify: _____

Date: _____ Signature: _____