

Request for Reconsideration of Materials

Date: _____

Name: _____

Address: _____

Email: _____

Phone Number: _____

Do you have a library card? Y N

Do you represent yourself or an organization? _____

Organization name: _____

Material Type (book, DVD, magazine, etc.): _____

Material Title: _____

Material Author/Producer: _____

What brought this material to your attention?

Have you read or reviewed the entire material? If not, how much/what sections have you read or reviewed? Please be specific (e.g. cite page numbers).

What concerns you about this material?

Are there any resources you might suggest to provide additional information on this subject?
(Please be aware that not all materials or resources might be available in the library.)
