

Request for Reconsideration of Library Materials

Verona Public Library

Required:

Your Name: _____ Date: ____/____/____
Address: _____ Phone: _____
Title of Item: _____
Author/Artist: _____

Please answer the following questions about the item that you would like to have reconsidered.

1. Did you find the item on the shelf at the Verona Public Library or place a hold through LinkCat?
2. How did you learn of this item?
3. What are your objections to this item (please include page numbers if applicable)?
4. Did you read/listen/view the work in its entirety? If not, what parts did you read/listen /view?
5. What harm do you feel might result from reading/listening to/viewing this work?
6. Have you read any professional reviews of the work? If so, please list sources of reviews.
7. What do you think are the main ideas of the work/what was the author's/artist's purpose in creating this work?
8. What suggestion do you have for a work with a similar purpose to replace this item?
9. What would you like the library to do with this material?

Thank you for taking the time to fill out this form. The Library Director will respond to your concerns within 10 days of the receipt of this form.

Signature and Date: _____