

Madison Library
REQUEST FOR RECONSIDERATION OF LIBRARY MATERIALS

Date: _____

Your Name _____

Address _____

City _____ State _____ Zip _____ Telephone _____

Do you represent self? _____ Organization? _____

1. Resource on which you are commenting:

____ Book ____ Textbook ____ Video ____ Display ____ Magazine ____ Library Program
____ Audio Recording ____ Newspaper ____ Electronic information/network (specify)
____ Other _____

2. Title _____

3. Author/Producer _____

4. What brought this resource to your attention?

5. Have you examined the entire resource?

6. What concerns you about the resource? (use other side or additional pages if necessary)

7. Are there resource(s) you suggest to provide additional information and/or other viewpoints on this topic?

Signature: _____

Revised: 10/28/2010, based on ALA Intellectual Freedom Committee sample form, 6/27/1995.
Approved: November 17, 2010 by the Board of Trustees