Madison Library REQUEST FOR RECONSIDERATION OF LIBRARY MATERIALS

Dat	Date:	
Yo	Your Name	
Ado	Address	
City	City State Zip Tele	ephone
Em	Email	
	Do you represent self? Or an organization? Name of Organizatio Are you a Madison resident?	n
1.	 Resource on which you are commenting: Book Textbook Video Display Magazine Audio Recording Newspaper Electronic information/network (specify) Other 	
2.	2. Title	
3.	3. Author/Producer	
4.	4. What brought this resource to your attention?	

- 5. Have you examined the entire resource? If not, what sections did you review?
- 6. What concerns you about the resource? (use other side or additional pages if necessary) Please be specific and cite pages or sections.
- 7. Are there resource(s) you suggest to provide additional information and/or other viewpoints on this topic?

8. What action are you requesting the trustees consider?

Signature:_____

Trustees Reviewed

Date:

Decision:

Revised: 10/28/2010, based on ALA Intellectual Freedom Committee sample form, 6/27/1995. Approved: November 17, 2010 by the Board of Trustees Revised: 1/19/2022, based on ALA Intellectual Freedom Committee sample form, January 2018. Approved: January 19, 2022 Revised and approved: September 21, 2022