



## REQUEST FOR RECONSIDERATION OF LIBRARY MATERIAL

The DeWitt District Library Board of Trustees has delegated the responsibility for selection and evaluation of collection materials to the Library Director, and has established reconsideration procedures to address concerns about those resources. Completion of this form is the first step in those procedures. If you wish to request reconsideration of library materials, please return a completed form in care of the Library Director, DeWitt District Library, 13101 Schavey Road, DeWitt, Michigan 48820. All decisions of the Board are final.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

I represent (circle one):

Myself | An Organization: Name of Organization: \_\_\_\_\_

Type of Resource (circle one):

Book | DVD | Magazine | Audiobook | Music CD | Other: \_\_\_\_\_

Title: \_\_\_\_\_

Author/Producer: \_\_\_\_\_

1. How did you learn about this work?
  
  
  
  
  
  
  
  
  
  
2. Did you read or listen to the entire work? We strongly encourage you to do so before completing this form.
  
  
  
  
  
  
  
  
  
  
3. What do you object to about this work? Please be specific, listing page numbers and/or specific passages when appropriate.
  
  
  
  
  
  
  
  
  
  
4. What do you believe is the major theme or intent of this work?

5. What do you feel might be the result of reading or listening to this work?

6. Did you find something good or worthwhile in this work? If so, what?

7. For what age group would you recommend this work?

8. Are you aware of this work's reputation, critical review, etc.?

9. What action would you like the library to take in regard to this work?

10. Please explain how this action would improve the library's service to the community.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_