

**ST. FRANCIS PUBLIC LIBRARY**  
**REQUEST FOR RECONSIDERATION OF LIBRARY MATERIALS**

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_

Email \_\_\_\_\_

**Identification of item:**

Author \_\_\_\_\_

Title \_\_\_\_\_

Format (book, film, cd, etc.) \_\_\_\_\_

1. Did you read/view/listen to the entire work? \_\_\_\_\_

2. Why do you object to this item? Please be specific \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Describe how this material is inconsistent with the library's collection development policy:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. What action would you like the library to take? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

5. What comparable material would you recommend that you feel would be more appropriate?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature \_\_\_\_\_

Received by \_\_\_\_\_ Date \_\_\_\_\_

Reviewed date \_\_\_\_\_