



## Request for Reconsideration Form

Forms must be completely filled out; anonymous complaints will not be considered. Requests will only be accepted from Webster residents with active library cards. The same work will not be reconsidered within a four-year period. The Library Director and Library Trustees will review and respond to the borrower initiating the request. The item will be reviewed within the context of the collection policy, literary reviews, and ALA guidelines. This completed form will appear in the Gladys E. Kelly Public Library's monthly Trustee report which is a public document.

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

Email \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State/Zip \_\_\_\_\_

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

Do you represent yourself? \_\_\_\_ Or an organization? \_\_\_\_

Name of Organization \_\_\_\_\_

### 1. Resource on which you are commenting:

\_\_\_\_ Book (e-book) \_\_\_\_ Movie \_\_\_\_ Magazine \_\_\_\_ Audio Recording

\_\_\_\_ Digital Resource \_\_\_\_ Game \_\_\_\_ Newspaper \_\_\_\_ Other

**Title** \_\_\_\_\_

**Author/Producer** \_\_\_\_\_

**2. What brought this resource to your attention?**

\_\_\_\_\_

**3. Have you examined the entire resource? Yes/No (Circle one) If not, what sections did you review?**

\_\_\_\_\_

**4. What in the work do you object to? Please be specific and cite pages where appropriate.**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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

\_\_\_\_\_

**6. What action are you requesting from the Library?**

\_\_\_\_\_