

DOLTON PUBLIC LIBRARY DISTRICT
REQUEST FOR RECONSIDERATION OF LIBRARY MATERIALS

Title: _____

Book: _____ Periodical: _____ Other: _____

Author: _____ Publisher: _____

Request initiated by: _____ Phone: (_____) _____-

Address: _____

Do you represent: _____ Yourself
 _____ An organization (name) _____
 _____ Other group (name) _____

1. To what in the work do you object: (Please be specific; cite pages.)

2. Did you read the entire work? _____ If not, which parts?

3. What do you feel might be the result of reading this work?

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

5. What do you believe is the theme of this work?

6. Are you aware of the judgments of this work by literary critics? _____

7. What would you like the library to do about this work?

_____ Do not lend it to my child
_____ Return it to the staff for re-evaluation
_____ Other (please explain)

8. In its place, what work would you recommend that would convey as valuable a picture and perspective of the subject treated?

Signature of person completing the form

Date

NOTE: This form must be completely filled out in order for further action by the staff and/or library board.