



Appendix F – Request for Reconsideration of Library Materials

Title

Material type (circle one) Book Periodical Video Other _____

Author

Publisher www.springer.com • www.springer.com/0-387-27227-3

Person initiating request _____

Address _____ **City** _____

State _____ **Zip** _____ **Phone number** _____

Email

Do you represent _____ Yourself

Yourself

An organization (name)

Other group (name)

1. To what do you object? (Please be specific. Cite pages.)

2. Did you read the entire work? Yes/ No If no, which parts?

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

Return it to library staff for reevaluation of age appropriateness of collection placement

Return it to library staff for reevaluation of inclusion in library collection

Other – explain

Signature _____ **Date** _____

Date

For Library Use Only

Staff member receiving
form _____ Date _____

Collection _____ Date _____

Developer _____ Date _____

Library Director _____ Date _____

Review _____ Date _____

Resolution _____ Date _____

Library Advisory Board agenda date (if
applicable) _____

To be filed in Library Director's office.