



## Request for Reconsideration of Library Materials

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### PATRON INFORMATION

Request initiated by \_\_\_\_\_

Address \_\_\_\_\_

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

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

With this request, I am representing...

Myself

An organization (please specify) \_\_\_\_\_

Other (please specify) \_\_\_\_\_

### MATERIAL INFORMATION

Author \_\_\_\_\_

Title \_\_\_\_\_

Format (check whichever is/are appropriate)

Book

Magazine

Audio/Visual

Digital

Other

### MATERIAL QUESTIONS

1. To what in the material do you object? (Please be specific; cite pages and/or timestamps)

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

2. What do you feel might be the result of reading, listening, or viewing this material?

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

3. For what age group would you recommend this material?

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4. Is there anything worthwhile about this material?

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5. Did you read, view, or listen to the entire work? If not, what parts?

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6. Are you aware of the reviews of this material by professional critics?

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7. What do you believe is the theme of this material?

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8. What would you recommend the library to do about this material?

Remove from circulation

Reevaluate

Other (please specify) \_\_\_\_\_

9. Is there a related title you would suggest as more appropriate or timely for our collection?

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Signature of Patron

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Date

***Information in this form may become public record due to Iowa State Open Records Laws.***

**Marion Public Library | 1101 6<sup>th</sup> Avenue | Marion, Iowa 52302**

**[www.marionpubliclibrary.org](http://www.marionpubliclibrary.org)**