**Summit Free Public Library Request for Reconsideration of Material Form**

The trustees of the Summit Free Public Library have established a materials selection policy and a procedure for gathering input about particular items. Completion of this form is the first step in that procedure. If you wish to request reconsideration of a resource, please return the completed form to the library director.

|  |  |
| --- | --- |
| Name |  Date |
|  Address  |  |
| Phone  | Email  |

Do you represent self? \_\_\_\_ Or an organization? \_\_\_\_ Name of Organization \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Resource on which you are commenting:

 \_\_\_ Book (e-book) \_\_\_ Magazine \_\_\_ Digital Resource \_\_\_ Newspaper

 \_\_\_ Movie \_\_\_ Audio Recording \_\_\_ Game \_\_\_ Other

Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Author/Producer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. What brought this resource to your attention?

1. Have you examined the entire resource? If not, what sections did you review?

1. What concerns you about the resource?

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

1. What action are you requesting the committee consider?

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_