

WESTLAKE PORTER PUBLIC LIBRARY
Request for Reconsideration of Library Materials

Title: _____

Author/Artist: _____

Publisher/Producer: _____

Request for reconsideration initiated by:

Name: _____

Address: _____

City • State • ZIP: _____

Telephone: Day _____ Evening _____

Requestor represents: Self Organization: _____

Please provide the following information after having read, viewed, or listened to the library material(s) in its entirety. Use additional sheets if needed.

Did you read/view/listen to the entire work? _____

Are you aware of the judgment of this item by professional critics?

To what do you object? Please be specific. (Cite pages, scenes, etc.)

Did you find anything of value in this material?

What do you feel might be the result of reading/viewing/hearing this material?

Would the material be better suited for a different age level?

What would you like the library to do about this material?

Would you be willing to discuss this material with the Board of Trustees of the library?

Signature _____	Date _____
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