

REQUEST FOR RECONSIDERATION OF LIBRARY MATERIALS
AT THE GREEN FREE LIBRARY

Name _____ Date _____

Address _____

Phone _____ Email _____

Title to be Reconsidered _____

Author _____

Publisher _____ Publication Date _____

Action Requested _____

This request made on behalf of : Myself Organization

Name of Organization _____

Have you read, viewed, or listened to this title in its entirety? _____

 If not, what part(s) did you examine? _____

To what in the material do you object? _____

Is there a part of the material you find redeemable? _____

Have you seen a review of the title? _____

 If so, where was the review? _____

Have you read the Green Free Library's Collection Development Policy? _____

Signature _____

Please use the back of this form if you need more space for your answers. Return the completed form to the Library Director.

Approved by The Green Free Library Board of Directors, October 13, 2014