

# REQUEST FOR RECONSIDERATION OF LIBRARY MATERIAL

DATE: \_\_\_\_\_

**DESCRIPTION OF MATERIAL TO BE RECONSIDERED:**

Author/artist: \_\_\_\_\_

Title: \_\_\_\_\_

Publisher: \_\_\_\_\_

Format:

book

magazine/newspaper

audio CD/cassette

DVD/videocassette

electronic

other \_\_\_\_\_

**REQUESTED BY:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zipcode: \_\_\_\_\_

Phone: (Days) \_\_\_\_\_ (Evenings) \_\_\_\_\_

**WHOM DO YOU REPRESENT?:**

self only

organization

Name of Organization: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zipcode: \_\_\_\_\_

Phone: \_\_\_\_\_

# Oil Region Library Association

## PLEASE COMPLETE THE FOLLOWING QUESTIONS:

1. Did you read/listen to/view the entire work? If not, which parts did you read/listen to/view?

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2. To what in this material do you object? Please be specific.

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3. What is the general theme of this work?

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4. What do you feel might be the result of reading/listening to/viewing this work?

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5. Although you object to this work, does it have any merit? What are some positive things in this material?

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# Oil Region Library Association

6. What originally attracted you to this material?

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7. What would you suggest the Library do with this material?

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8. Are there materials you suggest to provide additional information and/or other viewpoints on this topic?

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Thank you for your interest in the Oil Region Library Association. We appreciate you taking the time to provide the Library with the above information. You will be contacted as soon as possible.