Request for Reconsideration of Material

Author: ____________________________________________________

Title: ______________________________________________________

Date request received by staff: _________ Staff initials: _________

____Materials Manager  ____Staff Committee ____Library Director

Type of Material: [ ] Book  [ ] Movie  [ ] Music  [ ] Digital  [ ] Game  [ ] Other

1. Describe your concern about the material. Please be specific including page numbers.

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

3. In your opinion, is there anything good about this material, any redeeming quality?

4. Are you aware of any professional or literary reviews of this material?

5. What materials can you suggest to counterbalance the point of view of this material?

6. Did you read/watch the entire material?

Name: _________________________________________________________________

Representing: [ ] Self   [ ] Organization: _______________________________________

Address: __________________________________________________________________

Telephone: __________________________ Email:_______________________________

Adopted: 2/2013
Revised: 09/2015, 12/02/2021, 02/02/2023