Appendix A: Patron's Request for Reconsideration of Material

Patron's Request for Reconsideration of Material



Author Title			
			Publisher & Year (if known)
Nam	ne & Address of Individual Initiating Request		
	Phone:		
1. when	To what exactly do you object to in this material? (Please be specific and cite pages re possible.)		
2.	Did you listen to, read, or view the entire work?		
3.	For what age group do you feel this material is appropriate?		
4.	What do you think is the theme of this material?		
5.	What exposure have you had to this author or title?		

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6.	What other judgments of this work have you examined (book reviews, etc.)?		
7.	What action would you like to see the library t	ake in response to your complaint?	
8.	Is there another title you would recommend in	place of this one?	
9.	Do you have any other comments you would li	ke to make about this material?	
You	u may use the space below or attach a page if you	have additional comments.)	
	Signature	Date	

Thank you for your comments. The Library Director will call you for an appointment within 2 weeks to discuss your concerns more fully.

Russell County Public Library 248 W. Main St. Lebanon, VA 24266