

**Request For Reconsideration Form**

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

\_\_\_\_ Book \_\_\_\_ DVD \_\_\_\_ CD \_\_\_\_ Other, please specify \_\_\_\_\_

Author: \_\_\_\_\_

Publisher, publication date: \_\_\_\_\_

Request initiated by: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

Please answer all of the questions below, attaching a separate page if needed.

1. To what in the work did you object? Please list specific pages, passages, lyrics, frames, etc.
  
2. Did you read/listen to/watch the entire work? If not, what parts were read/listened to/ watched?
  
3. What do you believe to be the theme of this work?
  
4. Have you seen or heard reviews of this work? If yes, please name the source of the review:
  
5. What do you feel might be the result of reading/listening to/watching this work?
  
6. What would you like the Library to do about this work?
  
7. Can you recommend other materials which you consider to be of equal or superior quality?

Signature: \_\_\_\_\_ Date: \_\_\_\_\_