



### Materials Reconsideration Request Form

SECTION: 12.3.b

**PLEASE PRINT INFORMATION**

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

Library / Branch: \_\_\_\_\_

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

Publisher (If Known): \_\_\_\_\_ ISBN (If Known): \_\_\_\_\_

Request Initiated By: \_\_\_\_\_  
Last Name First Name MI

Address City State ZIP Phone (Day)

Resource on which you are commenting:

- Book / E-book
- Magazine
- Digital Resource
- Newspaper
- Movie
- Audio Recording
- Game
- Other

Is concern voiced by Group or Self? (Check Box)  GROUP  SELF

Concern(s) with Material (Please Explain): \_\_\_\_\_

Did you read entire book (material)?  YES  NO

If NO, what parts did you read? \_\_\_\_\_

Are you aware of any reviews for this book (material)?  YES  NO

If YES, please cite: \_\_\_\_\_

Is there anything else you would like us to know about the material? \_\_\_\_\_

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