

NEW CITY LIBRARY

CITIZEN'S REQUEST FOR RECONSIDERATION OF MATERIAL

IMPORTANT: The entire form must be completed in order for an item to be reconsidered.

PLEASE PRINT

Date _____

Request initiated by:

Address _____ Telephone _____

Complainant represents:

___him/herself

___organization

FORMAT: ___Book ___Video ___Audio cassette ___Compact disc
___Book-on-Tape ___other (specify) _____

Author/Artist/Director: _____

Title: _____

Publisher/Producer: _____

1. Did you read/view/listen to the entire item? _____

Parts _____

2. To what do you object: (Cite pages, scenes, etc.) _____

3. To what do you approve: (Cite pages, scenes, etc.) _____

4. What do you believe is the theme of this book/video/audio recording? _____

5. What do you feel might be the result of reading/viewing/hearing this material?

6. Are you aware of the judgment of this material by critics?

7. What would you like the library to do about this item?

—

—

8. What alternative book/video/audio recording of equal quality do you recommend that will convey a similar perspective? _____

—

Signature _____

12/20/90