Barrington Public Library Request for Reconsideration of Library Materials

The Barrington Public Library's materials selection criteria are described in detail in the Collection Development Policy. Should you have concerns regarding library materials in any area, completion of this form is the first step in the process. Once completed, please return the form to the library director who will review the form and contact you with a response. Please note: your comments are public records and your name, address, and phone number will be kept confidential from the general public to the greatest extent allowed by the law.

Name:	Date:
Address:	
City:	State: Zip:
Phone:	Email:
I represent:	□ Myself
	□ Organization
•	ganization, please provide the group's name, phone number, e-mail, and
Title of Item:	
Author/Presenter	• •
Format (Book, D	/D, CD, etc.):
Call Number:	
Have you read, v	iewed, listened to the entire work? \Box Yes \Box No
Have you read ar	ny reviews of this item? □ Yes □ No
Have you read th	e Barrington Public Library Collection Development Policy? □ Yes □ No
•	t this item has been placed in the wrong area of the collection, where do you be placed instead?
•	your concerns regarding this library material. (Please be specific, cite page s, and use back of page if needed):
Signature:	Date: