

**Wadleigh Memorial Library**  
**Request Form - Reconsideration of Library Materials and Programs**

**Format of material or Program:**

\_\_\_ Book \_\_\_ Magazine \_\_\_ Audiobook \_\_\_ Video \_\_\_ Music \_\_\_ Program \_\_\_ Other

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

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

Publisher: \_\_\_\_\_

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

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Complainant represents: \_\_\_ Themselves \_\_\_ Organization (please identify): \_\_\_\_\_

**PLEASE RESPOND TO THE FOLLOWING QUESTIONS.** If sufficient space is not provided, you may use the reverse side of this sheet.

- Did you read/view/listen to the entire book/item?
- To what in the material do you object? Please be specific, cite pages, etc.
- What do you feel might be the result of reading/viewing/listening to this material?
- For what age group would you recommend this material?
- Is there anything good about this material?
- What do you believe is the theme of this material?
- In its place, what material do you recommend that would provide adequate information on the subject?
- What action do you request the library to take?

\_\_\_\_\_  
Signature of Complainant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print or Type Name

A response from the Wadleigh Memorial Library regarding the **Request for Reconsideration of Library Materials and Programs** shall be available after its consideration by a Review Committee and/or the Library Board of Trustees.

Library Use Only					
Office	Date	Initials	Written Assessment to Patron	Date	Initials of Sender
M&P Review Committee Formed:	Date	Members	Board of Trustees Meeting	Date	Vote
M&P Review Committee meeting	Date	Decision	Written Assessment from Trustees	Date	