

BLAISDELL MEMORIAL LIBRARY

Form: Request for Reconsideration of Library Materials

The Blaisdell Memorial Library selection criteria are described in detail in the Collection Development Policy. This form will be reviewed by the library director, and you will be contacted with a response. Please note: your comments are public records. However, your name, address, and phone number will be kept confidential from the general public to the greatest extent allowed by law, including the USA Patriot Act.

Date_____

Name_____ Telephone_____

Address_____ City_____ State_____ Zip_____

I represent:

- Myself
- Organization:_____

Material for Consideration:

Title:_____

Type of Material (book, DVD, magazine, etc.)_____

Author/Producer/Publisher_____

Call number (spine label) _____

Did you read, view, or listen to the material in its entirety? Yes No

Have you read any reviews of the material? Yes No

Have you read the Blaisdell Memorial Library Collection Development policy? Yes No

Please describe your concerns regarding this material (please be specific, list page numbers/sections). Use the back of the page if necessary:

(Signature)

(date)