Request for Reconsideration of Library Resources Form

Date: ____________________________________________

Name: ____________________________________________

Address: __________________________________________

Phone: ____________________________________________

Email: ____________________________________________

Do you represent a group? Yes No (circle one)

If yes, please identify: __________________________________________________________

Type of Material: _____________________________________________________________

Title: ________________________________________________________________________

Author/Editor: __________________________________________________________________

Publisher: _____________________________________________________________________

Have you examined the entire resource? Yes No (circle one)

If not, what portions have you examined? _______________________________________

Please describe your concerns with the resource? Why? (Please be specific)
_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________

What specific pages, sections, or features illustrate your concerns?
_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________

How could your concerns about the resource be resolved?
_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________

Patron Signature: ____________________________ Date: ____________________________

Library Director Signature: ____________________________

Date Received: ____________________________

Only signed forms will be considered. The Library Director will acknowledge receipt of the form within two weeks.

A copy of the request form without identifying patron information will be mailed to the ALA Intellectual Freedom Committee.

Approved by the Providence Community Board of Directors, 12/21/2015