

Syracuse-Turkey Creek Township Public Library

Request for Reconsideration of Materials

Author/Creator _____ Title _____

Format: Book DVD Magazine Audiobook Other _____

Specific objection to materials, including page numbers or instances:

Have you read (listened to, viewed) the work in entirety? _____

What do you feel might be the result of continued use of this material? _____

What would you like the library to do about this material?

(Relocation to another area, restricted access, removal from the collection) _____

What other material do you recommend that would convey a perspective of the subject? _____

Requester represents:

Individual _____ Organization (name) _____

Resident of Turkey Creek Township? _____

Name _____ Phone _____ Email _____

Address _____ City/State/Zip _____ / _____ / _____

Signature _____

Your request for reconsideration will be presented to the Library Board of Trustees for review. You will be notified of the decision in writing. Challenged materials shall remain in normal use pending the decision of the Library Board.

Staff signature _____