



Request for Reconsideration – Resource Concern Form

Name:

Address:

Item or resource title, author, and format (book, DVD, audiobook, eBook, display, program, etc.)

Concern or objection to the item or resource:

Do you want to be contacted by a library manager? Yes/No

If yes, you will be contacted within two weeks

Preferred contact method/information:

For Staff Use Only:

Date received by manager:

Date patron contacted:

Notes: