

Approved by Library Board of Trustees _____

Request for Reconsideration of Library Materials

Date _____

If you have found materials or library resources about which you have concerns, please complete this form to assure prompt, complete consideration by the Library Director.

Your Contact Information:

Name _____

Address _____

City _____ State/Zip _____ Phone _____

_____ Email _____

Do you represent self? Or an organization? Name of Organization _____

Material for Consideration:

1. Resource on which you are commenting:

Book (e-book) DVD/CD Magazine Audio CD

Digital Resource Game Newspaper Other

Title _____

Author/Producer _____

2. Have you examined the entire resource? If not, what sections did you review?

3. Please describe your concerns about this material.

4. What specific pages/sections illustrate your concerns:

5. How did this material come to your attention?

Please send the completed form to Library Director, Shirley M. Wright Memoria Library, 11455 Fremont St, Trempealeau, WI 54661

