Lenox Library
18 Main Street
Lenox, Massachusetts 01240
(413) 637-0197 www.lenoxlib.org

Request for Reconsideration of Library Material Form

The Lenox Library has established a materials selection policy and a procedure for gathering input about particular items. Completion of this form is the first step in that procedure. If you wish to request reconsideration of a resource, please return the completed form to the Library Director.

Request initiated by: _____

Address: _____

City: _____ State/Zip: _____

Phone: _____ Email: _____

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

1. Title: _____

   Author: _____ Publisher: _____

2. Media format: __Book __Movie __Periodical __Other

3. What brought this resource to your attention?

_____

_____

4. What concerns you about this resource? Please be specific, citing pages or parts as appropriate.

_____

_____

_____

_____

5. Have you examined the entire resource? If not, which sections did you review?

_____

_____

_____

_____

6. To what age group would you recommend this resource?

_____

7. What action are you requesting the Library consider? What would you like the Library to do with this resource?

_____

_____

_____

_____

8. Are there other resource(s) you suggest to provide additional information and/or other viewpoints on this topic?

_____

_____

_____

_____

Signature: _____ Date: _____