



Lenox Library

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

Request for Reconsideration of Library Resources 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. Resource on which you are commenting:

Book/e-book Movie Magazine Audio Recording

Digital Resource Game Newspaper Program Other

Title _____

Author/Producer _____

2. What brought this resource to your attention?

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

4. What concerns you about the resource?

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

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

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

Signature: _____ Date: _____