

MARSHALL COUNTY LIBRARY SYSTEM

Citizen's Request for Reconsideration of Library Material

Author: _____

Title: _____

Publisher, if known: _____

Request initiated by: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone #: _____

Email, if available: _____

Complainant represents:

____ Himself or herself

____ Name of Organization _____

1. To what in the material do you object? (Please be specific; cite pages, etc.)

2. For what age group would you estimate this material was created? _____

3. Would you find it more appropriate for another age group? _____

4. Is there anything good about the material in your view? _____

5. Did you read/watch the entire title? ____ If not, what parts? _____

6. Are you aware of the judgment of this title by literary critics? Have you read any reviews of it? _____

7. What do you believe is the theme of this material? _____

8. In its place, what material of equal literary quality would you suggest that would convey as valuable a picture and perspective of the subject treated? _____

Signature of Complainant

Date