OHOOPEE REGIONAL LIBRARY SYSTEM
Patron request for reconsideration of library materials

Date________________________ Library card no. ______________________________
Full name ___________________________ Telephone _________________________
Address (mailing) _________________________________________________________
________________________________________________________________________
Address (residence if different from mailing)_________________________________
________________________________________________________________________

WHOM DO YOU REPRESENT?
_______ Self   _____ Organization (Please specify) ______________________________

MATERIAL:
____Hardcover book  _____Paperback book  _____ Periodical  _____A/V (Type)______
_____Other (Specify) ________________________________________________________
Author _________________________________________________________________
Title ___________________________________________________________________
Subject _________________________________
Classification/call number of item _____________________________________

Work is located in the ____________ Adult or ____________ Children’s collection?

REQUEST FOR RECONSIDERATION OF ITEM IN LIBRARY COLLECTION

1. Have you read the book or listened to/viewed the item in its entirety? _____________
If not, why not? __________________________________________________________________

2. Have you see or heard reviews of this material? ________________________________
If yes, please name the source(s) ____________________________________________
3. What do you believe is the theme or intent of this work? ______________________
________________________________________________________________________

4. To what in the work do you object? Please be specific, cite pages ________________
________________________________________________________________________
________________________________________________________________________

5. What would you like the library to do with this material? ______________________
________________________________________________________________________

6. What title of equivalent quality and subject matter would you recommend as a substitute for this work? __________________________________________________________
________________________________________________________________________

REQUEST FOR RECONSIDERATION OF MATERIAL NOT OWNED BY THE LIBRARY

1. Why do you feel this material should be in the library? ______________________
________________________________________________________________________

2. Please list any reviews or recommendations of this material. __________________
________________________________________________________________________

The Ohoopee Regional Library System appreciates your interest in our Library’s collection. You will receive written notification of the disposition of this request.

SIGNATURE OF COMPLAINANT __________________________________________

RECEIVED BY __________________________________________________________

DATE & TIME RECEIVED ______________________________________________