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847.223.5313
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Request for Reconsideration of Library Material Date_____

Type of Material _____ Book _____ Periodical _____ A/V _____ Other _____

Title_____

Author_____

Publisher_____

Requestor's Name _____

Address_____

Telephone Number_____

Requestor Represents: _____Self _____Group or Organization _____ Other _____

Have you read, seen, or heard the entire work? If not, which parts have you read, seen or heard?

Why do you object to this item?

To what specifically do you object? Please be specific, cite pages or sections:

(more questions on back)



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Do you find anything positive or valuable regarding this material?

What do you feel the result of exposure to this material might be?

For what age would you recommend this material?

Are you aware of the judgment of this material by professional critics and degreed librarians?

What review(s) of this material have you seen?

What would you like your library to do about this material?

Can you recommend other material that would convey as valuable a picture and/or perspective of the subject treated? Please specify:

Signature _____ Date _____