DERRY PUBLIC LIBRARY
REQUEST FOR RECONSIDERATION OF MATERIALS

The Derry Public Library appreciates any concerns you may have about materials, resources or services the library offers. So that we may address them fully, please fill out this form and return it to the attention of the Library Director. You will receive an acknowledgement upon the director's receipt of the form.

NAME (print) ___________________________________________ DATE ________

ADDRESS ______________________________ PHONE ______________

TITLE ________________________________ AUTHOR ________________

Please circle all that apply: Book Video Audio Magazine Internet Other _______________

Children Young Adult Adult

Have you read, listened to or reviewed the entire work? _______________________

Please specifically describe your objection to the material, citing page numbers or sections of particular concern. You may wish to consider such things as what you feel would be the result of reading/viewing/listening to this material, as well as age appropriateness and anything of positive value about it. Please use the back or attach separate sheet if necessary.

PATRON SIGNATURE __________________________________________

__________________________________ TO BE FILLED IN BY LIBRARY STAFF

Date Received: ___________ Director Signature: _____________________________

Disposition: ___________________________________________________________

__________________________________ Patron notified: ________________

Board of Trustees: ____________________________________ Patron notified: __________