Milne Public Library
Form for Reconsideration of Library Materials or Services

Name: _______________________________________
Date: ________________
Address: __________________________________________________________________________
E-mail address: ___________________________________________________________________
Phone: ________________________ Preferred contact method? Mail / Email / Phone
I am filling out this form: ___ As an individual
___ On behalf of a group/organization called: _____________________________________________

Please tell us as much as you can to help us identify this item.
Title: _______________________________________________________
Author/editor/creator: ____________________________________________
Publication/Creation Year: ___________ Call number: __________________________
Format (book, DVD, etc.): _____________________________________________
Any other identifying information? _____________________________________________

1. Please list your reasons for filing this request. Please be as specific as possible, citing pages or parts as appropriate. (You may attach pages to this form.)

2. How did you become aware of this item? Have you read/listened to/watched the entire thing? If not, which parts did you review?

3. Do you see any ways in which this item could be of value?

4. Please suggest alternative resources that could provide similar information on this topic to the community - in its place, what material of equal or better quality on this subject would you recommend?

5. What do you want the Library to do about this material?

Signature _______________________________________ Date: _______________

Approved by the Milne Public Library Board of Trustees on January 11th 2023