

New Milford Public Library
Request for Reconsideration of Library Material

Author/Performer: _____

Title: _____

Material Type: Hardcover ___ Paperback ___ Video/DVD ___ Music CD/Cassette ___ Other ___

Request initiated by: (Name): _____

Telephone: _____ Address: _____

City: _____

Complaint represents: ___ Self ___ Organization(Name): _____

Address: _____

1. To what do you object?

(Please be specific) _____

2. What do you feel may be the results of using this material? _____

3. For what age group would you recommend this material?

4. Does the work have any redeeming aspects

5. Have you reviewed the entire work? Yes ___ No ___ If not the entire work, what parts?

6. Are you aware of the judgment of this material by critical review sources? Yes ___ No ___

7. What actions are you requesting that the library take regarding this material?

Do not lend this to my child ___ Withdraw it for all library users ___ Send it back to the appropriate selection official for re-evaluation ___

8. What material of equal quality or value would you recommend, in its place? _____

Approved by the New Milford Public Library Board of Trustees on 10/18/23