

## Public Library Request for Reconsideration of Material Form

The trustees of Satre Memorial Milnor School Library have established a materials selection policy and a procedure for gathering input about particular items. Completion of this form is the first step in that procedure. If you wish to request reconsideration of a resource, please return the completed form to the library director.

Satre Memorial Milnor School Library  
PO Box 369  
Milnor, ND 58060

Date \_\_\_\_\_  
Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State/Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Email \_\_\_\_\_

Do you represent self? \_\_\_\_ Or an organization? \_\_\_\_ Name of Organization \_\_\_\_\_

1. Are you a resident of the City of Milnor? \_\_\_\_\_

2. Resource on which you are commenting:

\_\_\_\_ Book (e-book) \_\_\_\_ Movie \_\_\_\_ Magazine \_\_\_\_ Audio Recording  
\_\_\_\_ Digital Resource \_\_\_\_ Game \_\_\_\_ Newspaper \_\_\_\_ Other

Title \_\_\_\_\_

\_\_\_\_  
Author/Producer \_\_\_\_\_

3. What brought this resource to your attention?  
\_\_\_\_\_

4. Have you examined the entire resource? If not, what sections did you review?  
\_\_\_\_\_

5. What concerns you about the resource?  
\_\_\_\_\_

6. Are there resource(s) you suggest to provide additional information and/or other viewpoints on this topic?  
\_\_\_\_\_

7. What action are you requesting the committee consider?  
\_\_\_\_\_