



Request for Reconsideration Form

Date _____

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

Library Card Number _____

1. Please provide the following information regarding the material or program:

- Type (please circle)
Book (e-book) Movie Magazine Audio Recording
Digital Resource Game Newspaper Program/Event Other
- Title _____
- Author/Artist/Producer/Presenter _____

1. Have you read the Somerville Public Library's *Collection Development* or *Program Development* policies?

2. What brought this material or program/event to your attention?

3. Have you read, viewed, listened to, or participated in the entire work? If not, what sections did you review?

4. Please describe your concerns regarding this material or program/event:

5. Are there any specific examples within the material or program/event that illustrate your concerns?

5. Are there resource(s) you suggest that will provide additional information and/or other viewpoints on this topic?

6. What action(s) are you requesting the library consider?

*Forms may be submitted in writing to the attention of the Director of Libraries either in person, or c/o Somerville Public Library, 79 Highland Avenue, Somerville, MA 02143. Forms may also be submitted electronically through the Somerville Public Library's website or via email. For more information about the Library's reconsideration process please see our *Collection Development and Program Development policies*.*



Approved by the Somerville Public Library Board of Trustees May 11, 2022

Reviewed by the Somerville Law Department August 2022