

**Edward U. Demmer Memorial Library**

**H. Materials Selection/Collection Development Policy**

Approved by Library Board: 04/2008, 04/2012  
Last reviewed by Library Board: 05/2015

**Appendix D: Request for Reconsideration of Library Materials**

If you have an objection to library material(s), please complete this form, indicating as clearly and legibly as possible the nature of your concern. Please attach additional pages if you need additional space for your answers. Once completed, this form becomes a matter of public record: (Wisconsin Statutes 19.32).

Title: \_\_\_\_\_  
Author: \_\_\_\_\_  
Publisher \_\_\_\_\_  
Format (book, movie, recoring, etc.) \_\_\_\_\_  
Call Number or location in the Library: \_\_\_\_\_

What brought this to your attention?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you read/viewed/listened to the entire work? (circle) Yes / No

If no, then which parts have you reviewed?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

To what part of the work do you object? (Please be specific, example: cite pages)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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Do you feel there is any good in this work?

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Are you familiar with any professional reviews of this material?

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What action would you recommend the Library take in regards to this material?

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: (home/mobile) \_\_\_\_\_

Email address: (optional) \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_