Howell Carnegie District Library
Request for Reconsideration of Library Materials

Date______________________________________________
Title___________________________________________________________________________
Author_________________________________________________________________________
Book_______Periodical_______Audiocassette_______Videocassette_______Other_______
Publisher_______________________________________________________________________
Request initiated by ______________________________________________________________
Address________________________________________________________________________
City__________________________________State______________ZipCode________________
Telephone Number_______________________________________________________________
Do you represent

Yourself__________ An Organization (name)_________________________________________
Other group (name)_____________________________________________________________

1. To what in the work do you object? (Please be specific. List pages/tracks)

2. Did you read, view or hear the entire work?

3. What do you feel might be the result of reading/hearing/viewing this work might be?
4. What do believe is the purpose of this work?

5. Are you aware of reviews of this work by critics?

6. What type of actions would you like the library to take?

7. In its place, what work would you recommend that would convey as valuable a picture and perspective of the subject treated?