CCJPL Material Reconsideration Form

Date:								
Name:								
How would you pr	efer to be contacted:			0	Phone		0	Email
Phone number:								
Email address:								
Who do you represent?		0	Myself		0	An organi	zatio	on or group
If applicable, name	the group represented: _							
What is the format	of the item?							
0	Book							
0	DVD							
0	Audiobook							
0	Magazine/Newspaper							
0	Other (Please specify) _							
Title								
	item to your attention? _							
Have you read, list	ened to, or viewed the wo	rk in	its entiret	y?	O Yes		0	No
If not, please note	what parts you did read, l	isten	to, or view	٧.				
What specific thing	gs about this work do you	ifind	objection	able?	Please c	ite pages, p	assa	ages, or scenes and pro-
vide reasons why y	ou believe they make this	item	inapprop	riate	for the li	ibrary.		

Do you have suggestions about any materials that might provide additional information or alternative viewpoints											
on the topic covered in this work?											
For which age group do you feel this material is appropriate?											
Have you read the library's Collection Development Policy?	0	Yes	0	No							
Do you believe the inclusion of this item in the library violates	s this p	policy in	some way	? How?							
What kind of action would you like to see the library take rega	arding	this iten	n?								
Signature											
orginature											