

**North Manchester Public Library**  
**Request for Reconsideration**

DATE	
NAME	
ADDRESS	
CITY, STATE, ZIP	
PHONE #	
EMAIL	

Do you have an NMPL library card?    YES    NO

What is the resource on which you are commenting?

- Book
- Textbook
- Video
- Display
- Magazine
- Audio Recording
- Newspaper
- Other: \_\_\_\_\_

1. Title \_\_\_\_\_ Author/Producer \_\_\_\_\_

2. What brought this resource to your attention?

3. Have you examined the entire resource? (The material must be read, viewed, or listened to in its entirety.)

4. What concerns you about the resource? (use other side or additional pages if necessary)

5. Are there resource(s) you suggest to provide additional information and/or other viewpoints on this topic?
  
6. NMPL follows the American Library Association's "Freedom to Read Statement" and "Library Bill of Rights"? Do you see any discrepancy between these statements and having this material in our library? Please explain.
  
7. What action are you requesting?
  
8. Do you represent self? \_\_\_\_\_  
Or an Organization? \_\_\_\_\_
  
9. Name of the Organization:
  
  
10. In your view, what is the topic or theme(s) of this material?

*\*Please return this form to the library director.*

Date \_\_\_\_\_