

COLLECTION DEVELOPMENT
Fayetteville Free Library
Application for Reconsideration of Library Materials

Title _____

Author _____

Book? _____ If no, what? _____

Name of person making request _____

Address _____ Telephone _____

Person represent himself? _____ A group? _____

If group, give name _____

1. What do you believe is the theme or purpose of the materials? _____

2. Is your objection to this material based upon personal experience, upon reports you have heard, or both? _____

3. Have you read/ heard/ seen the material in its entirety? _____

4. To what do you specifically object? _____

5. Are you aware of the opinion of literary or educational reviewers regarding the book or material? _____

6. What action would you recommend regarding the use of this material? _____

Signature _____ Date _____