



## Request for Reconsideration Form

The trustees of Freeport Public Library have established a Collection Development policy and a procedure for gathering input about particular items. Completion of this form is the first step in that procedure. If you wish to request reconsideration of a resource, please return the completed form to the library director.

Freeport Public Library  
100 East Douglas St.  
Freeport, IL 61032

Date \_\_\_\_\_

Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State/Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Do you represent yourself? \_\_\_\_ Or an organization? \_\_\_\_

Name of Organization \_\_\_\_\_

### Resource on which you are commenting:

\_\_\_ Book (e-book) \_\_\_ Movie \_\_\_ Magazine \_\_\_ Audio Recording

\_\_\_ Digital Resource \_\_\_ Game \_\_\_ Newspaper \_\_\_ Other

Title \_\_\_\_\_

Author/Producer \_\_\_\_\_

What brought this resource to your attention?

\_\_\_\_\_

Have you examined the entire resource? If not, what sections did you review?

\_\_\_\_\_

What concerns you about the resource?

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Are there resources you suggest to provide additional information and/or other viewpoints on this topic?

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What action are you requesting the committee consider?

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