



*Parry Sound  
Public Library*

**Request for Reconsideration of Library Materials**  
**Please Print.**

Date: \_\_\_\_\_

Your Name: \_\_\_\_\_

Patron ID: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

Representing Self \_\_\_\_\_ Representing Group or Organization \_\_\_\_\_

**Resource in question**

Author: \_\_\_\_\_

Title: \_\_\_\_\_

Publisher: \_\_\_\_\_

Date: \_\_\_\_\_

ISBN: \_\_\_\_\_

1. Did you read the entire book? Yes / No  
If not, what sections did you read? \_\_\_\_\_
2. Why do you object to this item? Please be specific (page number, etc.)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
3. What are you asking the library to do?
  - a. Reclassify the item within the collection \_\_\_\_\_
  - b. Withdraw the item from the collection \_\_\_\_\_
  - c. Other \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**A Visit Will Get You Thinking**