

Request for Reconsideration of a Book

Please complete the following form which will be used by a review committee of staff members of the Tulsa City County Library. After the committee makes a recommendation regarding your request, you will be notified of the Library's decision.

Author: _____

Title: _____

1. Please cover your specific objections (i.e. give examples, cite pages, etc.)

2. Did you finish reading the book? Yes No

3. If not, what parts did you read?

4. Would you recommend this item for a different age group? Yes No

5. What do you feel might be the result of reading this book?

6. Comments: Please give your reasons for requesting that this item be reconsidered for the Library collection. Use reverse side for additional comments.

Name: _____

Address: _____ City/State _____ Zip _____

Email: _____

Staff Receiving Reconsideration: _____

Manager's Signature: _____

Library: _____

Date _____

Please send this form and a physical copy of the item if available to SSC – Collection Manager.