

Citizen's Requests for Reconsideration

Date:	Library Card Number:
Name:	Phone:
Address:	

Item to be reconsidered:

Call Number:

Title:					
Author:					
Format:	Book	DVD	VHS	Magazine	CD
Subject:					

1. Have you read the book (or listened to/watched the item) in its entirety? If not, why not?

2. To what in this work do you object? Please be specific and cite page/track/scene ...

3. Have you read or heard reviews of this title? _____ If so, please name the source

4. What would you like the Library to do with this title? _____

5. In its place, what would you recommend that would provide a similar perspective of the subject or theme? _____

The Garden City Library appreciates your interest in the Library's collection. You will receive a written response to this request.

Signature of complainant: _____

Received by: _____

Date & Time received: _____