

Rochester Public Library
Request for Reevaluation of Library Materials

Material Information

Title: _____

Author: _____

Format: Book Film Periodical Recording/Music Other: _____

Complainant Information

Last Name: _____ First Name: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Phone Number: () _____ Email: _____

Who do you represent? Self Other/Group: _____

Request Details *(Please answer ALL questions. Be specific. Use additional pages as needed.)*

1. What do you believe is the theme or purpose of this material?
2. What brought this material to your attention or how did you become aware of this material?
3. Have you read/viewed/listened to the entire material? Yes No If no, which parts did you read/view/listen to?
4. To what do you specifically object? (Please provide examples.)
5. Do you see any redeeming merit or value in the material despite your objections?
6. Are you aware of the opinion(s) of this material by qualified reviewers?
7. What action do you recommend the library take regarding this material?

X

Signature Date

Rochester Public Library
Request for Reevaluation of Library Materials