

Medfield Public Library

Request for Reconsideration of Library Materials

If you wish to request reconsideration of library materials or resources, please return the completed form to the director of the Medfield Public Library, 468 Main St, Medfield, MA 02052

Your Name _____

Address _____

Phone # _____ Email Address _____

Do you represent yourself or an organization?

- Self
- Organization (please specify) _____

What is the resource on which you are commenting?

- Book DVD Magazine Audio recording
- Other (please specify) _____

Title of resource _____

Author/Artist/Producer of resource _____

What brought this resource to your attention?

Have you examined the resource in its entirety? If not, what parts did you examine?

What concerns do you have about the resource? (use other side or additional pages if necessary)

Are you aware of the critical opinion of the work?

What would you like the library to do about this work?

Signature _____ Date _____