

Request for Reconsideration of Library Material

Please be aware your request will be reported to the Urbandale Public Library Board of Trustees and will be a matter of public record.
Title
Author
Format Book Audio Book Music DVD Magazine Other
Did you read, hear, or view the entire material? $\ \square$ Yes $\ \square$ No
If no, what parts did you read, hear, or view?
What do you find objectionable about the material? Please be specific by citing passages, scenes, etc.
Have you read any reviews of the material? \square Yes \square No
If yes, what reviews did you read?
What would be a satisfactory resolution to your request, considering others may want to read, hear, or view the material?
Are you a resident of Urbandale? Name
Signature
Address Zip code
Phone () Email
Represents 🗆 Self 🗆 Other, please name
Date/

Please send completed form to: Director, Urbandale Public Library, 3520 86th Street, Urbandale, IA 50322 or to njanning@urbandale.org