

Kingston Public Library

Patron's Request for Reconsideration Of Library Materials

Name of person initiating review of material _____

Telephone _____ Email _____

Address _____

Complainant represents: _____ (Self)
_____ Name of organization

Title of item _____

Format of Item (book, magazine, CD, cassette, video, DVD, computer program, web site) _____

Name of author/artist/editor/other _____

Name of publisher or producer _____

After having read/viewed/listened to the item in questions, what do you object to and why? Please be specific and cite page numbers or frames. Please use the back of this form if necessary.

What do you believe the theme and purpose of this item are? _____

Is your objection to this material based upon your personal exposure to it or upon reports you have heard from others? Or both? _____

Have you read/heard/seen this material in its entirety? _____

What do you feel might be the result of an individual's reading/listening to/ watching this material? _____

Do you think this item has any merit? Please explain: _____

Have you read any professional reviews of this item? _____

For what specific population or age group do you believe this item would be appropriate? _____

What would you like the Library to do with this item?

_____ **Do not circulate it to patrons under 17 years of age**

_____ **Withdraw it from the library collection**

_____ **Make it available only to those who wish to use it.**

_____ **Other (please specify)** _____

What item of equal quality would you recommend of the same subject and format in its place? _____

Please return to any KPL staff member.

Signature: _____ **Date** _____