Cranbury Public Library

Request for Reconsideration of Library Materials

To Be Completed by Library:	Date Received:	
	Ву:	
	CC to Board	
To Be Completed by Appellant: 1. Name, address, email and telephone number:		
2. Whom do you represent?	SelfOrganization/Other	(specify name):
3. Do you have legal represe	entation? If yes, provide name ar	nd telephone number:
4. Author, Title and Publisher	(if known):	
5. Form of Material (i.e., book, video, recording, etc.)		
6. Did you read, see or listen	to the piece in its entirety?	If not, then which parts?
7. If you believe the Library sh objectionable?	nould no longer carry this materia	II, what about it do you find
8. What do you feel might be	e the result of reading, viewing or	hearing this work?

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9. Is there anything that you find good in this work?
10. What work, in your opinion, would provide a similar perspective as the subject of this material?
11. What would you like the Library to do about this material?
12. If you believe the Library should carry the material, but does not, have you offered to donate the material to the Library?
13. If you disagree with the Library's decision to carry or not to carry the material, state the reasons why you believe the Library's decision violates its selection criteria policy.
Signature: Signature of Parent, if appellant is a minor:
Director's Response Attached. Date: If you wish to appeal this decision, please explain (attach additional sheets if necessary):
Referred to the Library Board, Date: