Manlius Library: Request for Reconsideration of Library Materials

If you wish to request reconsideration of library materials, please complete the form below and return it to the attention of Library Director at Manlius Library, 1 Arkie Albanese Ave, Manlius, NY 13104. Please note: your request will be forwarded to the Library Board of Trustees and it will become a matter of public record, including your name and address.

Patron Information					
Name:					
Date:					
Address:					
City:	State:	Zip:_			
Phone:	Email:				
Representing (please circle on	e): Self / Organizatio	n:			
Item Information					
Have you read the library's Co	llection Development	& Mainten	ance Policy?_	Yes	No
Title:					
Author:					
Format:					
Barcode:					
Comments on Item (Please at	tach additional pages	for comme	ents)		
What brought this work to you	ur attention?				
What concerns you about this	work?				
Did you read, view, or listen to	the entire work?				
To what do you object? Please	e be specific.				
Are you aware of the judgmen	nt of this work by criti	cs?			
What would you like us to do a	about this work?				
Re-evaluate it	Withdraw from co	llection, C	Other:		
What resources would you red	commend to provide	additional i	nformation or	this topic?	
Signature:					