

# Manlius Library: Request for Reconsideration

If you wish to request reconsideration of library materials, programs, or services, please complete the form below and return it to the attention of the Executive Director at Manlius Library, 1 Arkie Albanese Ave, Manlius, NY 13104.

Requests for reconsideration will only be considered if the entire form has been completed and submitted by a resident of the Fayetteville-Manlius School District. Incomplete forms will not be considered.

Your request and the results of the library's evaluation will be forwarded to the Manlius Library Board of Trustees for presentation in a public meeting and will become a matter of public record, including your name and address.

### Patron Information (This section must be completed.)

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Representing (please circle one): Self / Organization: \_\_\_\_\_

Are you a resident of the Fayetteville-Manlius school district? \_\_\_\_\_ Yes \_\_\_\_\_ No

Are you a Manlius Library cardholder? \_\_\_\_\_ Yes \_\_\_\_\_ No

Have you read the library's *Request for Reconsideration Policy*? \_\_\_\_\_ Yes \_\_\_\_\_ No

### Item Information (appropriate section must be completed)

#### ***Must complete for library materials:***

Have you read the library's *Collection Development & Maintenance Policy*? \_\_\_\_\_ Yes \_\_\_\_\_ No

Title: \_\_\_\_\_

Author: \_\_\_\_\_

Barcode: \_\_\_\_\_

#### ***Must complete for library services/programming:***

Name of Service/Program: \_\_\_\_\_

Date of Service/Program: \_\_\_\_\_

**Comments on Item (Please attach additional pages for comments as necessary.)**

***This section must be completed for all requests for reconsideration.***

What brought this material/program/service to your attention?

What concerns you about this material/program/service?

Did you read, view, or listen to the material in its entirety? Or participate in the entire program or service?

To what do you object and why? Please be specific.

Are you aware of professional reviews and/or of judgment of this material/program/service by critics?

What would you like us to do about this work?

\_\_\_\_\_ Re-evaluate \_\_\_\_\_ Remove \_\_\_\_\_ Cancel Service/Program

\_\_\_\_\_ Other: \_\_\_\_\_

What resources would you recommend the library provide for additional information on this topic?

**Signature:** \_\_\_\_\_