



Yellowhead Regional Library Request for Reconsideration of Library Material

Item Information

Title: _____

Author: _____

Type of Material: _____

Requestor Information (please print)

Name: _____

Address: _____

Town/City: _____ Postal Code: _____

Requestor represents:

self _____ organization _____ (please specify)

Request for Reconsideration Information

Have you read/viewed/listened to the entire item? Yes _____ No _____
If not, which part(s) have you read/viewed/listened to?

Please state your specific objections to this item (please be specific: cite pages or sections, etc.)

Please state the action you wish taken on this item:

Other comments: _____

Signature: _____ Date: _____

Please return this form, along with the item in question to your local library. They will forward your request and the item to Yellowhead Regional Library Headquarters. You will be notified in writing about the decision regarding this item.