

Saint Joseph Parish Library
Request for Reconsideration Form

Type of Resource:

_____ **Book**

_____ **CD / DVD**

_____ **Other**

Title: _____

Author / Publisher / Producer: _____

If sufficient space is not provided, attach additional sheets. Please sign each additional attachment.

What brought this resource to your attention?

Have you read this book, viewed this DVD, or listened to this CD in its entirety?

Please comment on the specific aspects of the materials to which you object. (Be specific: cite pages or locations.)

What resource(s) do you suggest to provide alternative coverage of this subject?

Your name _____ Date _____

Telephone _____ e-mail _____

Please return this form to the St. Joseph parish office. Thank you.