

**PIKES PEAK LIBRARY DISTRICT
REQUEST FOR RECONSIDERATION OF LIBRARY MATERIAL**

Title of Material to be Reconsidered: _____

Author of Material to be Reconsidered: _____

Did you read or view the entire work? Yes: _____ No: _____ Amount: _____

What is objectionable about the material, and how do you expect it to affect the users of the Library? (Be specific; cite page numbers or other particular references. Use back of form if necessary.)

Is there anything positive about the material as a whole? (Be specific; cite page numbers or other particular references. Use back of form if necessary.)

Have you consulted an evaluation of this work by experienced critics? No: _____ Yes: _____

(If "Yes", please cite): _____

What are your specific recommendations to the Library regarding this work?

Would you recommend this material for a specific age group? _____

If you are suggesting removal of the item, what work of equal value do you recommend for replacement?

Received By: _____ Branch: _____

The Pikes Peak Library District values the opinions of all members of the community.

Please be advised that this completed form will appear in the Pikes Peak Library District's Board of Trustees Report which is a public document.

Name: _____ Library Card Number: _____

Address: _____ Phone: _____

Representing: Self: _____ Organization (Name): _____

Signature: _____ Date: _____

Pikes Peak Library District
P.O. Box 1579
Colorado Springs, CO 80901
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