



Request to Reconsider Library Materials Form

The library accepts requests for reconsideration from cardholding Sonoma County residents for items owned by Sonoma County Library. The form must be completed in full for each title. Use additional pages if necessary to answer each question. A written response will be provided within 30 days.

1. Contact Information

Name _____ Date _____

Address _____ City _____

State _____ Zip _____

Phone _____ Email _____

Library card number _____

If you represent an organization, please provide name:

2. Information Regarding the Library Material

Title: _____

Author: _____

Format: _____

Other pertinent details: _____

3. Explanation

a. What brought this resource to your attention?

b. Have you examined the entire resource?

c. What concerns you about the resource?

d. Are there resource(s) you suggest to provide additional information and/or other viewpoints on this topic?

Submit signed and completed form to any library location or to director@sonomalibrary.org

Signature _____

Received by: _____	
Branch: _____	Date: _____