Request for Reconsideration

General Information:

It is a vital obligation of the Trails Regional Library to reflect differing points of view within its branches. However, there may be occasions when a patron of the library district may be concerned about a particular item in the library’s collection or the age appropriateness of a library program, event or display.

The following criteria are necessary for this form to be considered:

- The requester must be a resident within the tax-paying library district
- This form must be completed in its entirety
- One request form per item, program, event or display
- An item, program, event or display will not be reviewed more than once
- The requester must agree to read the Collection Development Policy

Once filled out, please return this form to a Library staff member. Your request will be forwarded on to the Director. The Director and appropriate staff will review the form and respond back to you with a written response within five (5) business days. This is a public record; therefore, the Library is responsible for making the public aware of any challenged materials, programs, events or displays. All identifying information of the person making the request will be excluded. Should you feel further consideration of the item, program, event or display is necessary after their decision, please contact the Director who will include a further review on the agenda of the next meeting of the Trails Regional Library Board of Trustees.
Request for Reconsideration Form: to be filled out by the patron

Patron Name: _________________________________    Library Card #: ___________________

Patron Address:_________________________________________________________________
_________________________________________________________________

Patron Phone #: ______________________________________________________________

Your concern is with  ____  Library Item; book, audio-book, DVD, magazine, etc
____  Library Program; age appropriateness -- Branch _______________
____  Library Event; age appropriateness -- Branch _______________
____  Library Display; age appropriateness -- Branch _______________

Title of work: ________________________________________________________________

Format: __ Book, __ Audio-Book, __ DVD, __ magazine, __ program, __ event, __ display

To what in the item, program, event or display do you have concerns or describe your objection
to the item, program, event or display? (Please be specific)
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Did you read/view/listen to the entire work? ________________________________________

If not, why did you not read/view/listen to the entire work? ____________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
What do you believe is the theme of the item, program, event, display? ________________

Is there anything positive about this item, program, event, display?____________________

If your concern is of a book, audio, DVD, or magazine, are you aware of any judgments of the work by professional reviewers? ________________________________

Additional comments: (Please use additional pages if needed)

Have you read the Trails Regional Library’s Collection Development Policy? ________________

Signature____________________________________________________  Date ____________

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