

Converse Free Library  
38 Union Street, Lyme, NH 03768

### REQUEST FOR RECONSIDERATION

Please complete this form if you have a concern about an item in the library's collection. The form should be returned to the Library Director. Library policy states that the Director must respond in 10 days.

Date \_\_\_\_\_  
Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_

Do you represent

- Yourself? \_\_\_\_\_
- Organization? \_\_\_\_\_

Resource on which you are commenting:

Title \_\_\_\_\_

Author/Producer \_\_\_\_\_

Format (circle one)

- Book
- Video
- Audio
- Other

What brought this resource to your attention?

Have you read, viewed or listened to the entire work?

What do you believe is the theme of this work?

What concerns you about the resource? (Please use other side or additional pages if necessary.)

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