

**LIBRARY MATERIALS RECONSIDERATION FORM**  
**Print Material**

Format: Book ( ) Periodical( ) Other \_\_\_\_\_

Author \_\_\_\_\_ Call # \_\_\_\_\_

Title \_\_\_\_\_

1. Did you read the entire work? Yes( ) No( ) If not, which parts? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

2. What specifically do you find objectionable in this work? (Please explain and cite pages.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. What do you think could result from other people reading this work?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reconsideration initiated by \_\_\_\_\_  
(Please Print Name)

Address \_\_\_\_\_ Phone \_\_\_\_\_

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

Date Received \_\_\_\_\_ by \_\_\_\_\_  
(Staff Member)

Elmhurst Public Library, 125 S. Prospect, Elmhurst IL. 60126 (630) 279-8696  
(Use other side for additional comments.)

*Your completion and signing of this form identifies you with specific library materials. As such, the information you provide in completing this form will be kept confidential by the Elmhurst Public Library.*