



**WAYNE COUNTY PUBLIC LIBRARY**  
**REQUEST FOR RECONSIDERATION OF LIBRARY MATERIAL OR DISPLAYS**

We value your opinion. If you have an objection to library material(s) or a display, please complete this form indicating the nature of your concern. The form will be given to the Director or other appropriate staff who will contact you regarding your concern. Please print or type. Thank you.

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Do you represent yourself? Y/N An organization? Y/N Name of Organization: \_\_\_\_\_

Resource on which you are commenting:

- Book       Magazine       Music       Digital Resource  
 Movie       Game       Display       Other: \_\_\_\_\_

Title of item or theme/location of display: \_\_\_\_\_

Author: \_\_\_\_\_ Publisher/Producer (if known): \_\_\_\_\_

Works are judged in their entirety. In order to help us understand your concern, please answer the following questions. Use the other side of this page or additional pages if necessary.

1. What brought this resource to your attention?
2. Have you examined the entire resource? If not, what sections did you review?
3. To what in this material do you object? Please be specific; cite pages or portions of audio or visual material.
4. What do you think might be the result of reading/viewing/hearing this material or by viewing this display?
5. For library material, have you read any reviews of the item?
6. Are there resource(s) you suggest that provide additional information and/or other viewpoints on this topic?
7. What action are you requesting the Library consider?

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Return the completed form to library staff or mail to:  
Director, Wayne County Public Library, Operations Center, 304 N. Market Street, PO Box 1349, Wooster, Ohio 44691