Huntingdon Valley Library Request for Reconsideration of Library Materials

1.	Author:
2.	Title:
3.	Publisher (if known)
4.	Format:HardcoverPaperbackCDCASSDVDElectronicMagazineNewspaper
	Display Link on Library's websiteOther (please specify)
5.	In what section of the library is the material located?AdultChildren'sYoung Adult
6.	How was the item brought to your attention?
7.	Did you read, view or listen to the entire work? YesNo
8.	What is your objection to the material? Be specific; cite pages: (Use back for form if necessary)
9.	. Do you know what literary critics and reviewers think of this material?YesNo
10	. For what age group would you recommend this material?
	. In its place, what material would you recommend that would convey a valuable picture and perspective of the pject treated?
12	. What would you like your library to do about this material?
13	. Are you familiar with the American Library Association Bill of Rights?YesNo
	Signed
	Print or type Name
	Phone #
	Address