



Request for Reconsideration

Please complete this form and return it to a staff member.

Date _____

Name _____ Phone # _____

Address _____

City _____ State _____ Zip _____

Email _____

Do you represent: yourself an organization? (check one)

800 Vine Street
Cincinnati OH 45202-2009

What type of material or service are you commenting on?

- Book
- Magazine
- Library Program
- Movie
- Music CD
- Display/Exhibit
- Newspaper
- Audiorecording
- Slide
- Internet Resource/Site
- Other (brief description)

What item/program/display/exhibit are you commenting on?

If commenting on an item, what is the title and author/performer/producer?

If commenting on a program/display/exhibit what is the title and the date?

How did this title/event/display/program/exhibit come to your attention?

(Recommended by staff member, review, friend's recommendation, found on shelf, visited library, library calendar announcement, publicity announcement, etc.)

Did you read or listen to the entire work, stay for the entire program, view the entire display? If not, which selection or part did you read or view?

What is it that you find objectionable? Please be specific; cite pages, excerpts, or scenes whenever possible.

Staff use only:

Agency _____

Staff Initials _____

Thank you for your comments. A member of our Administrative Staff will contact you regarding your concerns.

Please use the back of this page for further comments if necessary.