

**Wagner Public Library  
REQUEST FOR RECONSIDERATION OF MATERIAL  
Statement of Concern Form**

Completion of this form is necessary if you are requesting reconsideration of a resource used for public checkout. A separate form needs to be completed for each resource you want to have reconsidered.

Date \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State/Zip \_\_\_\_\_

Phone # \_\_\_\_\_ E-Mail \_\_\_\_\_

Representing self? \_\_\_\_ Or organization? \_\_\_\_ Name of Organization \_\_\_\_\_

Title of Book \_\_\_\_\_

Author \_\_\_\_\_

What brought book to your attention? \_\_\_\_\_

Have you examined the entire resource? \_\_\_\_\_ If not, what chapters/ pages did you review?

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

What are your concerns? \_\_\_\_\_

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

What would you like to see done? \_\_\_\_\_

\_\_\_\_\_

Thank you for your comments. Additional paper may be attached if needed. The Library Director will contact you in regards to your concerns.