

REQUEST FOR RE-EVALUATION OF LIBRARY MATERIALS

**Delta Township District Library
5130 Davenport Drive
Lansing, MI 48917
(517) 321-4014**

If you wish to recommend the removal of a particular item for the library's collection, you must answer the questions listed below.

Author _____

Title _____

1. How was this material brought to your attention?
2. Do you know what literary critics and/or reviewers think of it?
3. Have you read, viewed or listened to the entire item?
4. In your opinion, what is the theme of this material?
5. Are you objecting to the entire item or to specific portions of the item?
6. What is your objection to the material? Please cite specific examples and their location.

7. What do you feel might be the result of reading, viewing or listening to this material?

8. Do you feel other library patrons would enjoy this material?

Print Name _____

Address _____

City, State, Zip Code _____ Phone _____

Email address: _____

Signature _____ Date _____