

New Carlisle - Olive Township Public Library
Library Complaint Form
Request For Reconsideration of Material

Author _____ Hardback, Paperback, Non-Print

Title _____

Publisher (if known) _____

Request initiated by _____

Address _____ Telephone _____

City, State, Zip _____

Complainant represents:

____ Himself/Herself

____ Name of Organization _____

____ Identify Other Group _____

1. Did you read, listen, view the entire book or material? Yes No

2. Have you been able to discuss this material with the librarian? Yes No

3. What do you understand to be the general purpose for using this material?

-Offer a viewpoint that challenges popular thinking? Yes No

-Provide a learning experience for the reader in one kind of literature? Yes No

-Part of a well known author or artist's body of work? Yes No

-Other _____

4. Did the general purpose for the use of the material, as described by the librarian, seem a suitable one to you? Yes No

5. What do you think is the author's general purpose in this material?

6. What are your specific concerns about this

material? _____

7. Have you read these selections from the library's policy manual: Yes No

- The Freedom to Read
- Selection and Acquisition Policy for the New Carlisle - Olive Township Public Library
- Library Bill of Rights