



HUNTSVILLE-MADISON COUNTY
PUBLIC LIBRARY

RECONSIDERATION FORM

Author (Composer/Director): _____

Title: _____

Publisher/Producer: _____ Copyright: _____

Patron's Name: _____

Address: _____

Phone: _____ E-Mail: _____

Type of Library Material:

_____ Book _____ Audiobook _____ Video/DVD _____ Music _____ Other

What are your objections to this library material? _____

What harm do you feel this material might cause? _____

Did you complete the entire item? ____ Yes ____ No. If no, what parts did you complete? _____

Is there anything worthwhile in this material? _____

(Please turn)

Have you read any professional reviews of this item? ___Yes ___No. If yes, please list: _____

What do you believe are the main ideas of this material? _____

What do you think was the writer's/composer's/director's intention in creating this work? _____

What material with a similar purpose would you suggest as replacement for this item? _____

Additional Comments:

Date

03/04/09

Signature of Patron