



Anoka County

LIBRARY

707 County Rd. 10 NE
Blaine, MN 55434-2398

Phone (763) 324-1500 Fax (763) 324-1389

Request For Reconsideration

Request for Reconsideration of Library Resource or Material

Type or print legibly. Unsigned, illegible, or incomplete forms will not be considered.

Privacy Notice: Data provided on this Request for Reconsideration, including data about the requester, may be considered public data subject to the Minnesota Data Practices Act and/or may be disclosed to third parties.

Request initiated by:

Name First

Last

email: _____

Phone:

Cell

Home or work phone

Are you a resident of Anoka County?

Yes No

Address:

Street

Apt#

City

Zip

What is your comment in regard to:

- Printed Material
- Gap in materials or resources
- Video/Audio Recording
- Library Program
- Display
- Social Media
- Electronic Resource
- Other _____

Where did you first notice the material or resource:

- Social Media
- Name of Library _____
- Other _____

Title: _____

(if applicable)

Author/Producer: _____

(if known)

What brought this issue to your attention? _____

Did you read, watch, or review, the entire resource or material? Yes No

If not, which sections? _____

Explain your understanding of the intent or purpose of the material (to educate, to entertain, etc.) and for what audience it was created.

What concerns you about the material or resource? How will the material or resource affect the Anoka County community?
(Be specific - include citations or quotes for materials.)

What action are you requesting the committee consider? Relocation Removal Purchase a title previously denied for purchase
 Other _____

I have read ACL's Collection Development Policy, Request for Reconsideration Policy, and supporting documents.

Signature _____

Date _____

STAFF USE ONLY

Name of Staff & Building receiving initial complaint: _____

Date Reconsideration Form was given to Patron: _____

Name of Staff & Building completed form delivered to: _____

Date completed form was delivered to building: _____

FORWARD THIS COMPLETED FORM TO LIBRARY DIRECTOR IMMEDIATELY