

## **Chester Public Library**

21 W. Main St., Chester CT, 06412 PH: 860-526-0018

Email: library@chesterct.org

Website: chesterctlibrary.com

## **Chester Public Library Request for Reconsideration of Material Form**

The Library Board of Trustees of Chester Public Library have established a materials selection policy and a procedure for gathering input about particular items. Completion of this form is the first step in that procedure. If you wish to request reconsideration of a resource, please return the completed form to the library director.

Chester Public Library			
21 W. Main St.			
Chester, CT 06412			
Date			
Name			
Address			
City	State/Zip		
Phone	Email		
Do you represent self?	_Or an organization?	_Name of Organization _	
1. Resource on which you Book (e-book) Mov Digital Resource Ga	vie Magazine Audio	8	
Title			
Author/Producer			
2. What brought this reso	ource to your attention?		
3. Have you examined the	e entire resource? If not,	— what sections did vou re <sup>,</sup>	view?

"Sample Reconsideration Form", American Library Association, December 26, 2017. http://www.ala.org/tools/challengesupport/selectionpolicytoolkit/sampleforms (Accessed June 28, 2023) Document ID: 841f7590-aa5a-4359-9114-98727056f700



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4. What concerns you about the resource?

5. Are there resource(s) you suggest providing additional information and/or other viewpoints on this topic?

6. What action are you requesting the committee consider?