

**Request for Recommendation or Reconsideration of Library Materials**

Name of patron making request \_\_\_\_\_

Have you read our Collection Development Policy? \_\_\_ Yes \_\_\_ No

Are you a Madison resident? \_\_\_ Yes \_\_\_ No

Email Address \_\_\_\_\_

Telephone \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

To recommend an item for the library's collection, please answer the following questions:

Title \_\_\_\_\_

Author (if appropriate) \_\_\_\_\_

What is the subject of the item? \_\_\_\_\_

Have you read or viewed the item? \_\_\_\_\_

Why do you think it should be added to the library's collection? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date \_\_\_\_\_ Your signature \_\_\_\_\_

To request reconsideration of library materials, please answer the following questions:

Title \_\_\_\_\_

Author (if appropriate) \_\_\_\_\_

To what in the item do you object? (Please be specific and include page numbers, continue on next page if needed)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Did you read or view the entire item? \_\_\_\_\_

If not, which portion did you read or view? \_\_\_\_\_

\_\_\_\_\_

Do you know of any review? (Please cite source, date, and page) \_\_\_\_\_

\_\_\_\_\_

Date \_\_\_\_\_ Your signature \_\_\_\_\_