

Request for Reconsideration Form

The Winona Public Library has 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 at:

Winona Public Library
151 W. 5th Street
Winona, MN 55987

Date _____

Name _____

Address _____ City _____

State/Zip _____ Phone _____ Email _____

Do you represent self? ___ Or an organization? ___ Name of Organization _____

1. Resource on which you are commenting: Book (e-book) ___ Movie ___ Magazine ___
Audio Recording ___ Digital Resource ___ Newspaper ___ Other ___

Title _____

Author/Producer _____

2. What brought this resource to your attention?

3. Have you examined the entire resource? If not, what sections did you review?

4. What concerns you about the resource?

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

6. What action are you requesting the Winona Public Library consider?

Thank you for completing this form. The Library Director will respond to your request in a timely manner.