Appendix A

The Hartford 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.

Hartford Public Library
500 Main Street
Hartford, CT 06103

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 ___ Game ___ 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 committee consider?
________________________________________________________________________