

**NNDSB - Request for Reconsideration of Library Materials**

**Please Print.** **Date:** \_\_\_\_\_

**Your Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

\_\_\_\_\_

**Telephone Number:** \_\_\_\_\_

**E-mail address:** \_\_\_\_\_

**Representing Self** \_\_\_\_ **Group or Organization** \_\_\_\_\_

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**Resource in Question: Book** \_\_\_\_ **Video** \_\_\_\_  
**[Author, Title, Publisher, Date, ISBN]**

**1. Did you read or view all of the item? Yes/No**  
**If not, what sections did you read/view?**

**2. Why do you object to this item? Please be specific [page numbers, etc.]**

**3. In your opinion, for what age group would this material be appropriate?**

**4. What are you asking the Board to do?**

- a. **Not loan the item to my child/ren** \_\_\_\_
- b. **Withdraw it from the collection** \_\_\_\_\_
- c. **Re-classify it for older students** \_\_\_\_\_
- d. **Other** \_\_\_\_\_

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

**Please return this form to the library of your child's school.**

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**Office Use**