



Request for Reconsideration of Library Materials

If you have concerns about library materials or online resources, please complete this form and submit via online, drop at library or mail to Director, Po Box 1029 Stowe VT 05672.

Date

Contact:
Telephone/E-mail

First Name

Last Name

Street/Mailing
Address

Street Address
Line 2

City

State

Zip Code

.....
Author/Producer:

Publisher:

Title:

Type of Material

Books

Audio/CD

Magazine/Newspaper

Online Resource

Other

Please describe your concerns regarding this material:

What Specific pages/selections illustrate your concerns: