

Material Reconsideration Form

West Georgia Regional Library System seeks to provide opportunities that allow individuals to freely examine subjects and make their own decisions. WGRLS and the Regional Board are aware that patrons may have concerns with the inclusion of certain materials in the collection and welcome the expression of concern by patrons. WGRLS will only consider concerns brought by residents of the five counties which it serves. If your discussion with library staff has not alleviated your concern, please complete this form and return it to your local WGRLS library.

Your Information:

Date: _____ Member Library: _____

Full Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Material Information:

Author: _____

Title: _____

Format: Book Movie Audiobook Magazine Other _____

Have you read/viewed the item in its entirety? Yes No

If not, how much did you read/view?

What do you object to in this material? Please be specific and cite pages or minute marks. (Please use the back of this form if needed.)

What actions would you like the library to consider taking in reference to this material?

How would you like to receive notification about our decision regarding this matter mailed to the above address? Mail Email Email address (if selected): _____

The West Georgia Regional Library System appreciates your interest in our library's collection.

Your signature: _____

Group represented (if applicable): _____

Library staff member receiving form:

Date of resolution from regional review:
