

**HANNIBAL FREE PUBLIC LIBRARY  
REQUEST FOR RECONSIDERATION FORM**

The Hannibal Free Public Library Board of Trustees has established a collection development 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 Hannibal Free Public Library, 200 South Fifth Street, Hannibal, MO 63401.

Date \_\_\_\_\_  
Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State/Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Email \_\_\_\_\_

Do you represent yourself?  Or an organization?  Name of Organization  
\_\_\_\_\_

Are you a registered borrower of Hannibal Free Public Library who resides within the service district and is in good standing?  yes  no

1. Resource on which you are commenting:

Book (e-book)  Movie  Magazine  Audio Recording  
 Digital Resource  Game  Newspaper  Program  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 Library consider?  
\_\_\_\_\_

Request initiated by: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Telephone: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_