



## **Request for Reconsideration Form**

The Library Director and Board of Trustees of Hagaman Memorial Library have entrusted the responsibility of selecting, managing, and deselecting materials, programs, and displays to professional staff, whose education and experience has prepared them for these important duties. In the event that a member of the community would like to request reconsideration of library materials, completion of this form is the first step.

Please note a patron requesting reconsideration of library materials will be provided with a packet of documents that includes the Library's Material Review & Reconsideration Policy, including The Library Bill of Rights, the Freedom to Read Statement, and the Freedom to View Statement from the American Library Association. These documents are available at the Circulation Desk and must be picked up in person. All requests must be from an individual residing in the town of East Haven with a current Hagaman Library Card. Incomplete forms, those that do not include a full name, address, telephone number, and signature, or forms that do not follow the minimum requirements outlined in the Library's Materials Review & Reconsideration Policy will not be accepted and will not receive a reply.

**If you wish to request reconsideration of library materials, this form must be completed in its entirety and returned in person to library staff at Hagaman Memorial Library, 227 Main Street, East Haven, CT 06512.**

Full Legal Name: \_\_\_\_\_ Date: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email address: \_\_\_\_\_

Library Card Number: \_\_\_\_\_

Are you representing yourself or an organization? \_\_\_\_\_

If you are representing an organization, please list the organization: \_\_\_\_\_

\_\_\_\_\_



Resource on which you are commenting:

\_\_\_\_ Book      \_\_\_\_ Display      \_\_\_\_ Movie      \_\_\_\_ Magazine      \_\_\_\_ Program

\_\_\_\_ Music      \_\_\_\_ Newspaper      \_\_\_\_ Artwork      \_\_\_\_ Other (Please Specify)

\_\_\_\_\_

Title: \_\_\_\_\_

Author/Artist/Producer/Provider: \_\_\_\_\_

Year Published: \_\_\_\_\_

Format: \_\_\_\_\_

1. What is the subject of this material?
2. What do you believe is the purpose of this material?
3. What brought this material to your attention?
4. Have you read or viewed the material in its entirety? If not, what portion did you read or view?
5. What age level do you feel would be the appropriate audience for this material?
6. If the item was removed from the library, what item would you suggest to replace it?
7. Are there other resources you would suggest to provide additional information and/or other viewpoints on this topic?



8. What concerns do you have about the material? (*Use additional pages if necessary*).

9. Specify which portion or portions of the material is objected to and explain the reason for your objection (*Use additional pages if necessary*).

10. Overall, do you think there is any value in this material?

11. Are you aware of any critical reviews dealing with this material? (*List here, or provide as an attachment*).

12. Why do you feel your negative feelings about this work should prevent other members of the East Haven community, who may not share your concerns, from accessing this material?

13. What would you like the library to do about this material?

Please sign and date below and return this form to library staff at the Hagaman Memorial Library. You will be notified within 60 days of receipt of the results of the reconsideration process. Reconsideration requests are not confidential patron records under section 11-25 of the CT General Statutes.

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

*Policy approved by the Hagaman Memorial Library Board of Trustees November 20, 2025.*