Sun Prairie Public Library Request for Reconsideration Form

Requester information

Name:	
Address:	
Telephone:	
Email:	

Material Information

Title:	
Author:	
Type of material:	Book Film Audio Book Music Software (circle one)
Patron has read/viewed/listened to item in its entirety: Yes No	
Reason for reconsideration:	
Action patron would like taken:	

Submitted to:		Date:	
Reviewed by:		Date:	
Library Director:		Date:	

Action:_____
_____
_____