



**HAMILTON EAST
PUBLIC LIBRARY**

Request for Reconsideration

Date: _____

Resource type:

- Print Material
- DVD/Audio/CD
- Electronic Resource
- Display/Exhibit
- Program
- Other: _____

Title/Description: _____

Author/Producer/Performer: _____

Date/Edition: _____

Did you read, view or listen to the entire work? _____

Did you see the exhibit/display in person? _____

Please describe your concerns regarding this material, display, exhibit, or program:

What specific pages/sections illustrate your concerns?

How did this resource come to your attention?

Contact Information

Your Name: _____

Address: _____

City: _____ Zip: _____ Phone: _____

Organization Represented (if any): _____

Please send or email this completed form to: Deputy Director Melissa Loiseau, Noblesville Library, One Library Plaza, Noblesville, IN 46060 loisellem@hepl.lib.in.us A response will be returned in writing within 6 weeks of the date this form is received. **This response may be appealed to:** Hamilton East Public Library Board of Trustees, One Library Plaza, Noblesville, IN 46060