



3016 S 25th E  
Ammon, ID 83406

208-757-6393

bclld.org

## Request for Reconsideration

---

Please complete this form and return it to a staff member.

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

Do you represent:  Yourself  An Organization? (check one)

Organization Name \_\_\_\_\_

Have you read the Bonneville County Library's Collection Development Policy? Yes  No

---

1. Resource on which you are commenting:

Book  Movie  Magazine  Audio Recording  ebook  
 Digital Resource  Game  Newspaper  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? Please be specific; cite pages, excerpts, or scenes whenever possible.

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 committee consider?

---

*Thank you for your comments. The Library Director will contact you regarding your concerns.*