PEARL RIVER PUBLIC LIBRARY
PATRON’S REQUEST FOR WITHDRAWAL
OF LIBRARY-OWNED MATERIALS

Please fill out all of the items below:

Date: _________________________

Name: ________________________________

Address: ________________________________________________________________________________________

Do you have a Pearl River Public Library card? ______ Yes ______ No

The material that you are recommending for withdrawal is

____ book     _____DVD     _____audio     _____magazine     _____ music CD     _____other

Title: ____________________________________________________________________________________________

Author(s): ________________________________ Publication Date: __________________________

Did you read, watch, or review the entire book, video, etc.?

_____ Yes     _____ No (How much? ___________________________)

What part or parts of the material do you object to?

What part or parts of the materials were false or inaccurate?

What point-of-view was the author trying to convey?

Who would be harmed by reading or viewing this material? How would they be harmed?

Do you think that the average Library user should be able to decide for himself/herself about the suitability of this

material? Why or why not?

Signed _________________________________________________________

(Please mail to the Library or drop off at a Library service desk. The procedure for handling these requests is contained in
the Library’s “Materials Selection Policy.” It includes review by professional Library staff and the ability to appeal to
the Library Director, and if necessary, the Library Board of Trustees.)