

Request for Reconsideration of an Item in UAHT Library's Holdings

Completion of this form is the first procedural step in requesting to have an item in UAHT Library's collection reconsidered. Please return this completed form to UAHT Library's Director at UAHT Library, 2500 South Main, Hope, AR, 71801.

Date _____ Name _____

Address _____

City _____ State/Zip _____

Phone _____ Email _____

Do you represent yourself? _____ Do you represent an organization? _____

Name of organization you represent: _____

1. Type of resource you want reconsidered: ___ Book ___ e-Book ___ Movie
___ Magazine ___ Audio Recording ___ Digital Resource ___ Textbook
___ Newspaper ___ Other

Title: _____

Author: _____

Publisher: _____

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? _____

5. Resources that provide additional information or another viewpoint on this topic? _____

6. What action are you requesting the committee to consider? _____