

Request for Reconsideration of Library Materials Form

Cocke County Schools has established reconsideration procedures to address concerns regarding school library materials. Completion of this form is a step in those procedures. If you wish to request reconsideration of school or library resources, please return this completed form to your school library media specialist.

Date:			
Name:			
Address:			
City:	State/Zip:		
Phone:	Email:		
Do you represent self? Or an organizati	ion? Nan	ne of organization:	
Resource on which you are commenting:Book (e-book)DatabaseMovieAudio RedMagazineDigital Red		Textbook App Newspaper	Game Streaming Media Other
Title:			
Author/Producer:			
Is the resource part of the curriculum, library	collection, or c	other?	
What brought this resource to your attention?	·		
Have you examined the entire resource? If n	ot, what section	ons did you review?	
What concerns you about the resource?			
Are there resource(s) you suggest to provide	additional info	ormation and/or other view	points on this topic?
What actions are you requesting be considered	ed?		