MOUNT OLIVE PUBLIC LIBRARY

REQUEST FOR RECONSIDERATION OF LIBRARY MATERIALS

**Mission Statement:** The Mount Olive Public Library serves as the informational, educational, and cultural center of our Township. This is accomplished by providing a diverse array of media, technology, programs, and consultative services that support the advancement of intellect, creativity, social responsibility and historic preservation for all to utilize.

The Mount Olive Public Library has established a Request for Reconsideration of Library Materials Policy and a process for gathering input on a particular item. Completion of this form is the first step in this process.

Only requests by Mt. Olive residents will be adhered. A valid library card or proof of residency must be included with this completed form.

Prior to submitting this form please indicate if you’ve completed the following steps. If you were not given a packet of documents along with this form, please ask for assistance.

- Have you read the MOPL’s Mission Statement? (See above)
- Have you read the MOPL Selection of Materials Policy?
- Have you read the Request for Reconsideration of Library Materials Policy?
- Have you read the American Library Association (ALA) Library Bill of Rights? Link here: http://www.ala.org/advocacy/intfreedom/librarybill
- Have you read the American Library Association Freedom to Read Statement? Link here: http://www.ala.org/advocacy/intfreedom/freedomreadstatement
- Have you provided a valid library card or proof of residency

Name: ___________________________ Date: ___________________________

Address: ___________________________

City: ___________________________ State: ______ Zip Code: ______

Telephone #: ___________________________ (Please specify - Cell or Land Line)

Email Address: ___________________________

Approved at the regular meeting of the Library Board of Trustees on 09/12/2001; revisedUPDATED, digitized, and approved on 02/15/2023
Who do you represent?  
Self  
Or an organization?

If you represent an organization, please it's complete name, address and contact information.

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**Type of Material:** (Please mark an X on the line for which you want consideration)

- [ ] Adult Book
- [ ] Juvenile Book
- [ ] Newspaper
- [ ] Audio Book
- [ ] Digital Media
- [ ] E-Book
- [ ] CD/Music
- [ ] Young Adult Book
- [ ] Magazine
- [ ] Other: (Please Specify) ________________________________

Please fill in the following information for Type of Material:  
*(Please be as specific as possible)*

Title: ________________________________

Author/Producer: ________________________________

What brought this resource to your attention?

Have you examined the entire resource? If not, which sections did you review?
What concerns you about this resource?

If you believe this resource does not meet the standards of MOPL policies, please share which policy with which it is not compliant and how?

Are there resource(s) you suggest providing additional information and/or other viewpoints on this topic?

Are you aware of any reviews by critics concerning this material? If so, what reviews and what was the content of the reviews?

What action are you requesting the MOPL consider?

If you wish to request reconsideration of a resource, please return all specified completed forms to the Library Director:

**Mount Olive Public Library**
Attention: Library Director
202 Flanders-Drakestown Road
Flanders, New Jersey 07836