



LIBRARY MATERIAL REVIEW AND RECONSIDERATION REQUEST FORM

If you wish to request reconsideration of a library-owned or acquired resource, please return this completed form to a staff member or mail it to the library, to the attention of the City Librarian. Per Library policy, the City Librarian will make a decision to remove or retain the material in question. Library material under reconsideration will be reviewed according to the Library Material Review and Reconsideration Policy.

The name of the patron requesting reconsideration of library material must include: full name, address, and telephone number on this form or it will not be accepted. All requests must be from an individual residing in the city of Bridgeport.

Please also note that Reconsideration of Library Materials requests may be reported to state and national library organizations for statistical purposes, and that while the Library will protect patron confidentiality within the confines of the law, Reconsideration of Library Materials requests are subject to FOIA requests and, as such, any information reported on these requests is not necessarily protected.

Please fill out the form below in its entirety:

Name: _____ Date: _____

Full Address: _____

Phone: _____ Email: _____

Library Card Number: _____

Are you representing yourself? _____

Are you representing an organization? _____

Name of Organization (if applicable) _____

1. Resource on which you are commenting:

___ Book/e-book ___ DVD ___ Audio Recording ___ Magazine ___ Newspaper ___ Digital
Resource ___ Display ___ Artwork ___ Library Program ___ Other (please specify)

Title _____

Author/Artist/Producer/Provider _____

Date of work: _____

2. Specify which portion or portions of the material is objected to and explain the reason for your objection. (Use additional pages, if necessary.)

3. What brought this resource to your attention?

4. Have you read or viewed the material in its entirety? Y N

5. What concerns you about this material? (Use additional pages, if necessary).

6. Are there resources you suggest providing additional information and/or other viewpoints on this topic?

7. What do you believe is the purpose of this material?

8. For what age group should this material be recommended?

9. Are you aware of any critical reviews dealing with this material? List here, or provide an attachment.

10. Why do you feel your negative feelings about this work should prevent other members of the Bridgeport community, who may or may not share your concerns, from accessing this material?

11. Overall, do you think there is any value in this material?

12. What action are you requesting the Library to consider?

Please sign and date below and return this form to the attention of the City Librarian. You will be notified within 60 days of receipt of the results of the reconsideration process. Reconsideration requests are not confidential patron records under section 11-25 of the Connecticut General Statutes. By signing below, you attest that you have read/viewed/listened to the resource in its entirety.

You may submit this completed request from by giving it to any Bridgeport Public Library staff member, or by mailing it to: City Librarian, Bridgeport Public Library, 925 Broad Street, Bridgeport, CT, 06604.

Signature: _____ Date: _____

OFFICE USE ONLY

Date of Review:

Decision: (Keep, Move, Withdraw, Other):

Signature of City Librarian: _____

Approved Library board of Directors: 11/15/2023; Rev. 9/16/2025;
Approved: State Library Board: 10/23/2025: Approved: Library Board of Directors: 11/19/2025