Request for Consideration of Library Resource

AUTHOR: ______________________________________________________

TITLE: __________________________________ FORMAT: ______________

PUBLISHER: __________________________________ PUBLICATION DATE: ______

Request initiated by: ______________________________________________

Address: ____________________ City: ___________________________
Zip Code: ____________________ Phone: _________________________

Is this request made on behalf of:
_____________ Yourself
_____________ Organization ________________________________

(Name of Organization)

Have you read/viewed this title in its entirety? _________________

What is your endorsement of the resource? (Please be specific: i.e. cite pages.) _______________________

Is there anything negative about the resource? _______________________

Please state the reason for your request ______________________________________________________

Action Requested: ________________________________________________

Have you read the KYRC Library Selection Policy? ___________________________

Are you aware of the judgment of this resource by literary critics or area subject specialists? ___________

(Please provide names of reviewers and citations for reviews, if known) ____________________________

Date __________ Signature of Patron: ___________________________________

Date __________ Received by Staff Member: ________________________________

Final 11/11/09