

**Terrebonne Parish Library
Statement of Concern**

(Must be a Terrebonne Parish resident with an ACTIVE library card)

Name: _____

Address: _____ Telephone _____

Email address: _____

Library card #: _____

Complainant Represents:

_____ Self

_____ Organization or group (Identify) _____

_____ School (Identify) _____

Material Questioned:

Book: Author _____ Title _____

Circle one: ● Book ● DVD ● Graphic novel ● eBook ● Audio book ● Other _____

1. To what in the work do you object? Please be specific.

2. What of value is there in this work?

3. What do you feel would be the result of reading, viewing, or listening to this work?

4. For what age group would you recommend this item?

5. Did you read or view the entire work? _____

1. Are you aware of the judgment of this work by critics? _____

8. What do you believe is the theme or purpose of this work?

8. In its place, what material would you recommend that would convey a more valid picture or perspective of our civilization?

9. What action would you prefer that the library take regarding this material?
_____ Withdraw it from the collection
_____ Restrict its use by minors
_____ Move to another collection

Other (please explain)

Signature of Complainant

Date

THIS REQUEST WILL BE REVIEWED BY THE LIBRARY DIRECTOR

MUST BE FILLED OUT IN ITS ENTIREITY OR SHALL BE CONSIDERED INVALID