



MERIT LIBRARY MATERIAL REVIEW REQUEST FORM

Please complete all sections below to request review of material in the Merit library collection.

Title:

Author:

Contact information from individual requesting review of material:

Name:

Telephone:

Address:

City:

Zip:

Email:

Does your child attend Merit? Yes ___ No ___

Was this material recommended, assigned, or made available through Merit? If so, please provide details.

What concerns you about this material? Please provide examples, page numbers, links, or any other information to help in locating or identifying content of concern. Please attach any images or other corroborating evidence.

What action are you requesting the committee to consider?

Signature: _____ Date: _____