



REQUEST FOR RECONSIDERATION OF INSTRUCTIONAL MATERIALS

(To be submitted by all persons requesting the reconsideration of school materials)

Title _____

Author _____

Publisher or Producer _____

Type of Media (book, film, textbook, etc.) _____

Copyright date _____

Request initiated by _____

Telephone _____ Work Phone _____ Best time to reach you _____

Address _____ City _____ Zip _____

1. To what in the material do you object? (Please be specific, cite pages, frames in a filmstrip, film sequence, etc.) _____

2. Have you read, viewed and/or auditioned the entire material to which you object? _____

If not, what parts did you read? _____

3. Are you aware of the judgment of this material by literary critics? _____

4. Any merits noted in this material? _____

5. What action would you like the district to take in regard to this material? _____

6. Additional comments (please use the reverse of this page, if needed). _____

Signature of complainant _____ Date _____

Please return completed form to school principal.