## I-7: Request for Reconsideration of Library Media Materials



## **REQUEST INFORMATION**

Complete this form and submit it to the school principal to request a review of school library media materials.

ew Requested By:			
Name:			
Address:			
Phone: work		Cell	
School:			
erial to Be Reviewed	d:		
Title:			
Author:			
Publisher:			
Medium:	🗆 Print (Book, )	magazine, newspaper)	Audio (Tape, CD, etc.)
	Visual (Video	tape, DVD, etc.)	□ Other
you read/view the e	entire work?	□ YES	□ NO
as the material: Assigned by a tea	acher?	□ YES	□ NO
Selected by the s		□ YES	
<sup>.</sup> eby request a revi	iew of this material	by the appropriate Li	brary Media Review Comn
	Signature		Date
			<b>.</b> .

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