

REQUEST FOR RE-EVALUATION OF SCHOOL LIBRARY MATERIALS

Personal Details:

Request initiated by: _____ Phone: _____

Address: _____ City: _____ Zip: _____

Complaint represents: Myself Group/Organization

Name of group/organization _____

Dates you discussed concern with teacher, media technician or principal? _____

Name of teacher or media specialist? _____

Options offered or discussed: _____

About the Material in Question:

Title: _____

Author/Producer: _____ Copyright Year: _____

Publisher: _____

Was this material assigned or free choice? _____

Form of material (X):

___ Book

___ Video/DV

___ Recording

___ Other

Please respond to the questions below. Incomplete forms will not be considered. (Use additional paper if necessary)

1. Have you seen or read this material in its entirety? Yes No

2. What is your objection to the material? Please cite specific passages, pages, etc. that you object to and explain why.

3. How do you feel the reader or viewer of the material would be impacted?

4. Which reviews of this material have you read? What do these reviews say? (reviews can be found at commonsensemedia.org and goodreads.com)

5. What would you like to see happen to this material?

- No action.
- Do not assign or lend it to my child.
- Withdraw it from all students as well as my child.
- Other (Describe) _____

6. Do you have any recommendations for other material we should include in our collection to convey an adequate perspective of the theme treated by this material?

Parent's signature: _____

Date: _____

Principal's signature: _____

Date: _____