COMPLAINTS CONCERNING INSTRUCTIONAL RESOURCES

Last Revised Date: 08/22/2023

Request for Reconsideration of Instructional Resources

Author: _____

Title: _____

Publisher: _____ Copyright Date: _____

Format of Material (i.e., book, film, video cassette, recording, etc.): _____

Request initiated by (name): _____

Address, City, State, Zip: _____

Phone (cell): _____ Email: _____

Complainant represents themselves or organization? Please identify organization, if involved:

_____

Name of Organization: _____

Address, City, State, Zip: _____

Did you read or review the entire material(s)? ☐ **Yes** ☐ **No**

At Which school was the material located? _____

To what in the material do you object? Be specific by citing pages and content:

_____

_____

_____

_____

In its place, do you have a recommended replacement? _____

_____

_____

What harmful effects, if any, do you perceive might result from use of this material? _____

_____

_____

_____

What would you like the school or the district to do about this book/film/instructional materials?

- ☐ Do not assign it to my child
- ☐ Remove it from the total district program
- ☐ Use only with parental permission
- ☐ Restrict its use to:
  - ☐ Grades 7-12 only
  - ☐ Grades 9-12 only

Signature of Complainant: _____ Date: _____

Submit form to School Principal or Superintendent's Office.