

LAKWOOD SCHOOL DISTRICT #306
CITIZEN'S REQUEST FOR
RECONSIDERATION OF MATERIAL

TITLE: _____

FORMAT: (i.e., hardcover, paperback, video, etc.) _____

AUTHOR: (or Producer) _____

PUBLISHER: (or Distributor) _____

SCHOOL FROM WHICH MATERIAL WAS OBTAINED: _____

Request initiated by: _____ Telephone: _____

(Street Address)

(City)

(Zip Code)

1. To what in the material do you object? (Please be specific: cite pages or section) _____

2. What do you feel may be the result of a pupil's interaction with this material? _____

3. What do you believe is the theme or purpose of the writer or producer of this material? _____

4. Would you recommend this material for any age group? (Please specify) _____

5. Have you read, viewed, or listened to the material in its entirety? _____

6. What would you like your school to do about this material:

- Do not allow my child to use it.
- Place on reserve shelf, labeled "Available only on request."
- Make available only upon written request from parent.
- Do not allow any child to use it.
- Other (Please specify) _____

7. Is there any like material of equal (literary) quality which you would recommend in its place that would convey as valuable a picture and perspective?

Signature of Complainant

Date

If you desire to make additional comments, please attach another sheet or write on the reverse side of this form.