

Parent/Guardian Request For Reconsideration Of Instructional Material

Title _____

Author _____

Publisher (if known) _____

Type of material: book _____ non-book (please specify) _____

What do you find objectionable in the material? (be specific and cite pages or parts)

Did you read or view all the material under consideration? _____

If not, which sections did you review? _____

What do you believe is the theme of this material? _____

What do you feel might result from reading or viewing this material? _____

In your opinion, are there educational benefits in this material? _____

If so, what are the benefits? _____

How would you like the school district to respond to our complaint about this material? _____

What material would you recommend as a replacement? (please explain) _____

Name and Signature of Complainant

Date

Address

Telephone

Submit this form to the assistant superintendent of K-12 education.