

RECONSIDERATION OF INSTRUCTIONAL AND LIBRARY MATERIALS
REQUEST FORM

Request for re-evaluation of printed or multimedia material to be submitted to the superintendent.

Review Initiated By: (Optional) _____ Date: _____

Name: _____

Address: _____

City, State: _____ Zip: _____ Telephone: _____

School(s) in which item used: _____

Relationship to school (parent, student, citizen, etc.) _____

Book or Other Printed Material, if Applicable:

Author: _____ Hardcover: _____ Paperback: _____ Other: _____ Title: _____

Publisher: _____

Date of Publication: _____

Multimedia Material if Applicable:

Title: _____

Producer (if known): _____

Type of material: _____

(website, online resource, filmstrip, motion picture, etc.)

Person making the request represents: (circle one) Self Group or Organization

Name of group: _____

Address of group: _____

1. What brought this item to your attention?

2. To what in the item do you object? (Please be specific; cite pages, or frames, etc.)

3. In your opinion, what harmful effects upon students might result from use of this item?
4. Do you perceive any instructional value in the use of this item?
5. Did you review the entire item? If not, what sections did you review?
6. Should the opinion of any additional experts in the field be considered?
 Yes No
If yes, please list specific suggestions:

7. Do you wish to make an oral presentation to the Review Committee?
 Yes
- A. Please contact the Superintendent
 - B. Please be prepared at this time to indicate the approximate length of time your presentation will require. Although this is no guarantee that you'll be allowed to present to the committee, or that you will get your requested amount of time. Minutes: _____
- No

The committee will review your request and notify you if your request is granted; however, there is no guarantee that each and every request will be granted, either in terms of appearing before the committee or in receiving the amount of time requested.

Signature

Date