

Citizen's Request For Reconsideration Of Instructional Material

Title _____

Author _____

Publisher (If Known) _____

Type of material: Book _____ Non-book (Please Specify) _____

Complainant Represents: Self Organization

Position In Organization _____

To What In the Material Do You Object? Be Specific (Cite Pages or Parts)

Did You Read Or View All Of The Material Under Consideration? _____

If Not, What Parts? _____

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? _____

For What Age Group Would You Recommend This Material?

Elementary Middle School High School Adult

How Would You Like The School District To Respond To Your Complaint About This Material?

What Material Would You Recommend As A Replacement? (Please Explain Why) _____

Signature of Complainant _____ Date _____

Address _____ Telephone: Home _____ Work _____

RETURN THIS FORM TO YOUR PRINCIPAL