## **REQUEST FOR RECONSIDERATION OF INSTRUCTIONAL MATERIALS**

Name of Complainant		Address		Phone Number	
Please complete the following information and respond to the questions. Attach additional pages, if necessary.					
Author:					
Title: _					
Where was this material used?					
School		Teacher	Class	Grade Level	
1.	Is the resource part of the curriculum, library collection or other?				
2.	Are students required to use the material? Yes/No/Unsure				
3.	To what in the material do you object? (Please be specific. Cite pages or particular sequences of material)				
4.	Did you read, view, or listen to the entire material? Yes/No If not, what section did you review?				
5.	What value is there in the m	aterial?			
6.	What do you feel might be the result of a student using this material?				
7.	Have you read reviews of this material by reputable sources such as library critics and				
	reviewers? If so, please list	sources.			

8. What do you believe is the theme or purpose of this work?

9. Are you aware of the teacher's purpose in using this material?

10. What would you prefer the school do about this material?

- 11. What other materials of the same subject or content would you recommend that would convey a similar perspective in place of this material?
- 12. Additional comments:

Printed name of complainant

Date

Signature of complainant

1<sup>st</sup> Reading-12/18/2023 2<sup>nd</sup> Reading-1/15/2024 Date Adopted-1/15/2024 Last RevisedDate