Educational Program

Series 600

Policy Title: Reconsideration of Instructional Materials Request Form

Code No. <u>605.3A</u>

Request for re-evaluation of printed or audiovisual material to be submitte	d to the superintendent.
Review Initiated By:	Date:
Name	
Address	
City/State Zip Telephone _	
School (s) in which item is used	
Relationship to school (parent, student, citizen, etc.)	
Book or Other Printed Material if Applicable:	
Author Hardcover Paper	back Other
Title	
Publisher (if known)	
Date of Publication	
Audiovisual Material if Applicable:	
Title	
Producer (if known)	
Type of material (filmstrip, motion picture, etc.)	
Person Making the Request Represents: (check one)	
Self Organization	
Name of group	
Address of group	

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What brought this item to your attention?	
To what in the item do you object? (please be specific; cite pages, or frames, et	c.)
n your opinion, what harmful effects upon students might result from use of thi	is item?
Do you perceive any instructional value in the use of this item?	
Did you review the entire item? If not, what sections did you review?	
yes no	
To replace this item, do you recommend other material which you consider to be superior quality for the purpose intended?	
	n your opinion, what harmful effects upon students might result from use of the Do you perceive any instructional value in the use of this item? Did you review the entire item? If not, what sections did you review? Should the opinion of any additional experts in the field be considered? — yes no If yes, please list specific suggestions:

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(a) Please call the office of the Superin	tendent	
(b) Please be prepared at this time to in will require: minutes	ndicate the approximate length of time	your presentation
No		
Dated	Signature	
Date of Adoption: January 8, 2014	Legal References (Code of Iowa):	
Date Amended:		
Related Administrative Rules and Regulations:		
Date Reviewed: March 13, 2024		