

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. To what in the material do you object? Please be specific.
2. Did you read, view, or listen to the entire material? _____ If not, what parts didn't you?
3. What value is there in this material?
4. What do you feel might be the result of using this material?
5. Are you aware of any judgment of this material by professional critics?
6. What do you believe is the theme or purpose of this work?
7. Are you aware of the teacher's purpose in using this material?
8. What would you prefer the school do about this material?
9. What work of equal value would you recommend in place of this material?
10. Additional comments.

Signature of Complainant_____
Date