Form 2020

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**Citizen’s Request for Reconsideration of Instructional Materials**

Request initiated by:

Telephone: Address:

Patron represent: Self

\_\_\_\_\_\_\_\_\_\_\_ Organization:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The format I/we object to is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How and where the material is being used:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title:

Author:

Publisher:

1. Are you aware of the District objectives in using this material?

.

1. What do you find objectionable in the material(s)? Please be specific, or cite pages/section:

.

1. What do you feel might be the consequence of using this resource?

.

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1. For what age group would you recommend the material(s)?

.

1. Is there anything of value in the materials?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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1. Did you read, hear or see the entire content? If not, what part(s)?

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\_\_\_\_\_

1. Are you aware of the judgment of this material by literary or subject matter critics?

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1. What do you believe is the theme of this material?

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1. What would you like your school to do about this materials?

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Do not assign it to my child.

Do not present it to my child.

Withhold it from all students.

Seek more suitable materials for this purpose.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Complainant

Return completed form to Principal