

**CITIZEN'S REQUEST FOR RE-EVALUATION
OF INSTRUCTIONAL MATERIALS**

Building Level

Check type of material:

- Book Video/DVD Periodical
 Kit Computer Software Audio (i.e.) Cassette/CD
 Other

Title _____

Author _____

Publisher/Producer _____

Request initiated by _____

Telephone _____ Address _____

City _____ State _____ Zip _____

1. At what school is the material in question being used or made available?

2. To what material do you object? (Be specific: cite pages and paragraphs, video sequence, etc.)

3. What do you feel might be the result of using this material? _____

4. For what age group would you recommend this material? _____

5. What positive qualities do you find in this material? _____

6. Did you read, view and/or hear the material in question in its entirety? _____

If not, what did you read, view or hear? _____

7. Are you aware of the judgment of this material by experts in the field and/or literary critics?

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

9. What would you like the school to do about this material? _____

10. What other instructional material of the same subject and format would you recommend in its place? _____

Date

(Signature of Complainant)

Please return this form to the building principal.

FOR CENTRAL OFFICE USE ONLY

Date of complaint _____

Date of decision _____

Date filed with Superintendent's office _____

**CITIZEN'S REQUEST FOR RE-EVALUATION OF
INSTRUCTIONAL MATERIALS
District-Level**

Check type of material:

- | | | |
|--------------------------------|--|---|
| <input type="checkbox"/> Book | <input type="checkbox"/> Video/DVD | <input type="checkbox"/> Periodical |
| <input type="checkbox"/> Kit | <input type="checkbox"/> Computer Software | <input type="checkbox"/> Audio (i.e.) Cassette/CD |
| <input type="checkbox"/> Other | | |

Title _____

Author _____

Publisher/Producer _____

Request initiated by _____

Telephone _____ Address _____

City _____ State _____ Zip _____

Date of original Request for Re-Evaluation _____

Principal to whom request was submitted _____

Date of building-level committee's decision _____

1. Briefly explain your objections to the above materials as presented in your original Request for Re-Evaluation.

2. What did you originally request that the school do about this material?

3. Describe the nature of your involvement with the building-level committee.

4. What compromises/alternatives did you propose to the building-level committee?

5. What compromises/alternatives did the library media specialist propose to the building-level committee?

6. What compromises/alternatives did members of the building-level committee propose?

7. What was the decision of the building-level committee? _____

8. Have you amended (altered or added to) your original objections to the material?
_____ If so, please explain. _____

9. Do you have any complaints or concerns about the process (as opposed to the decision of the committee) up to this point?

10. On what basis are you seeking reconsideration of the building-level committee's decision?

Date

(Signature of Complainant)

Please return this form to the office of the Superintendent.

FOR CENTRAL OFFICE USE ONLY

Date of original complaint _____

Date of building-level decision _____

Date filed with Superintendent's office _____

Date of District-level decision

Date filed with Superintendent's office
