Form 6400FM

REQUEST FOR RECONSIDERATION OF INSTRUCTIONAL MATERIALS OR LIBRARY MEDIA FORM

Please complete this form and return it to building principal. Please note a formal request for reconsideration will not be accepted until the informal process has been concluded.

Request Initiated by:			
Telephone:	E-mail		
Address:			
The material to which I object is of the f	following type:		
Major Course Adoption	Computer Software		
School-Based Curriculum	Website		
Textbook	Novel (Fiction)		
e-Book	Novel (Non-Fiction)		
Script (play)	Video (DVD, Web, Streamed) Movie		
Music (streamed, CD)	Other		
·	cion of library media or instructional materials by meeting with: Date:		
Principal Name:	Date:		
instructional material in its entirety. If sign your name to each additional attace. Have you read or viewed the reconsider	·		
what was the approximate date you rea	au of viewed it:		
To what in the material do you object?	(Please be specific, cite pages, etc.)		

What critics or authoritative so	urces have you consulted	d regarding this material?	
What do you believe is the ther	me or purpose of this ma	terial?	
What do you feel might be the	result of a student using	this material?	
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What would you like the school	to do about this materia	al?	
Do not use the material v	vith my student.		
Do not use the selected s	ection with my student.		
Reconsider use at differe	nt grade level.	What grade level?	
Withdraw it from use wit	h all students.		
What would you recommend b	e used in place of the ma	iterial?	
 Date	Signature of Co	mplainant	