REQUEST FOR RECONSIDERATION OF LEARNING RESOURCES

Requester Information		
Name:		
Mailing Address:		
City:	**Postal Code:**	**Phone:**
School Name:		
Age or Grade of Student(s) Using the Challenged Material:		

Resource Questioned	
Print	Author:
	Title:
	Publisher:
	Copyright Date:
	☐ Hardcover ☐ Paperback (select one)
Non-print	(select one)
	☐ Magazine ☐ Film ☐ Filmstrip ☐ Record ☐ CD-Rom ☐ Other
	If other, specify:
	Title:
	Publisher/Producer (if known):

Please respond to the following questions. If insufficient space, feel free to use additional sheet(s).

1. Did you review the entire item? (check one): ☐ Yes ☐ No

<u>If no</u>, what sections did you review?

2. To what do you object? (Please be specific)

3. What do you believe is the main idea of this material?

4. What do you feel might be the result of a student using this material?
5. Is there anything good about this material? ☐ **Yes** ☐ **No** **<u>If yes</u>, please state**
6. Are you aware of the judgement of this material by professional critics?
7. In your opinion, for what age group would this material be more appropriate?
8. In the place of this material, would you care to recommend other material that you consider to convey a similar perspective of society and set of values? (Please state)

_____ _____

Requester Signature Date

OFFICE USE ONLY	
Date Request received:	
Date Summary Report provided to Requester:	
Principal's Signature:	**Date:**