## <u>CODE NO. 605.3E2</u>

## RECONSIDERATION OF INSTRUCTIONAL AND LIBRARY MATERIAL REQUEST FORM

Request for re-evaluation of printed or multimedia m <u>REVIEW INITIATED BY</u> :	aterial to be submitted to the superintendent. DATE:			
Name				
Address				
City/State Zip	Code Telephone			
School(s) in which item is used				
Relationship to school (parent, student, citizen, etc.)				
BOOK OR OTHER PRINTED MATERIAL IF APPLICABLE:				
Author Hardc	over Paperback Other			
Title				
Publisher (if known)				
Date of Publication				
MULTIMEDIA MATERIAL IF APPLICABLE:				
Title				
Producer (if known)				
Type of material (website, online resource, filmstrip, motion picture, etc.)				
PERSON MAKING THE REQUEST REPRESENTS: (circle one)				
Self	Group or Organization			
Name of group				
Address of Group				

- 1. What brought this item to your attention?
- 2. To what in the item do you object? (please be specific; cite pages, or frames, etc.)
- 3. In your opinion, what harmful effects upon students might result from use of this item?
- 4. Do you perceive any instructional value in the use of this item?
- 5. Did you review the entire item? If not, what sections did you review?
- 6. Should the opinion of any additional experts in the field be considered?

yes	no
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If yes, please list specific suggestions:

7. To replace this item, do you recommend other material which you consider to be of equal or superior quality for the purpose intended?

8.	Do you wish to make an oral presentation to the Review Committee?		
		Yes	(a) Please contact the Superintendent
			(b) Please be prepared at this time to indicate the approximate length of time your presentation will require. Although this is no guarantee that you'll be allowed to present to the committee, or that you will get your requested amount of time.
			Minutes.
		No	
	Dated		Signature
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	opted: viewed:		03/03/1986 02/10/2025

Revised:

11/21/2022