

## Request for Reconsideration of Instructional Materials

Type of material: ☐ Book ☐ Audio/Video ☐ Periodical ☐ Adopted Textbook  
☐ Other (please specify) \_\_\_\_\_

Title: \_\_\_\_\_ Author: \_\_\_\_\_

Publisher: \_\_\_\_\_ Copyright date: \_\_\_\_\_

### Request initiated by:

Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Complainant represents: ☐ Himself/Herself ☐ Group or Organization

Name and Address of Group or Organization (if applicable): \_\_\_\_\_

**Details of the Complaint:** (If you need more space for your answers, please use the back of these sheets and/or attach a separate page.)

1. Did you read, view, or listen to the entire work? ☐ Yes ☐ No If not, what sections did you read, view, or hear? \_\_\_\_\_  
\_\_\_\_\_
2. What is your objection to the material? (Please be specific--cite pages, pictures, etc.): \_\_\_\_\_  
\_\_\_\_\_
3. What do you believe is the theme of the challenged material? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
4. In your opinion, what harmful effects upon students might result from the use of this item? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Which age or group should be allowed access to this material? Please explain.

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6. Is there an age or group that should be restricted access to this material? Please explain.

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**Research:**

7. Are you aware of any judgments of this work by literary critics?

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8. Can you recommend another title for the school library to purchase that is comparable or presents the opposite, or alternative, point of view to the material in question?

Title: \_\_\_\_\_ Author: \_\_\_\_\_

Publisher: \_\_\_\_\_ Copyright date: \_\_\_\_\_

**Action Requested:**

12. What would you like to have done with this material?

\_\_\_ Do not assign/lend it to my child

\_\_\_ Discontinue use as text or supplementary material

\_\_\_ Place on Limited Access for specific ages/grades

\_\_\_ Remove it from the Media Center

\_\_\_ Other (please specify) \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

--Thank you for your input. Please return this form to the School Principal--

School District Contact: Heather Rawlins, District Literacy Coordinator,  
[heather.rawlins@levyk12.org](mailto:heather.rawlins@levyk12.org)