

**REQUEST FOR RECONSIDERATION OF INSTRUCTIONAL/  
LIBRARY MEDIA MATERIALS**

**E 361.1**

To prevent misunderstanding of your complaint, please fill in the following information.

Request initiated by:

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_

Representing:

STUDENT'S NAME\_/ ORGANIZATION'S NAME \_\_\_\_\_

Instructional or Library Media Material: \_\_\_\_\_

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

Author/Publisher/Producer: \_\_\_\_\_

Location of Material: (Library Media Center, Specific Course, or Other) \_\_\_\_\_

What action would you like to see taken:

- Request originating department/school to re-evaluate use of the material
- Substitute alternate material or media
- Deny the use of the material or media by my child
- Deny use of the material or media by all students
- Other: \_\_\_\_\_

\_\_\_\_\_

Due to limited space, please feel free to extend comments onto additional pages.

1. Have you either read, heard or seen the material or media in its entirety? If not, what part did you see, read or hear? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. To what in the instructional or library material or media do you object? (Please be specific. Please also include page or section of specific content.) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. What do you feel may result from the use of this material or media? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. What do you believe is the theme of this material or media? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. For what age group would you recommend this material or media? \_\_\_\_\_  
\_\_\_\_\_

6. What do you find to be otherwise good about this material or media? \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_

7. Are you aware of any judgments of this work by literary or other critics? \_\_\_\_\_

\_\_\_\_\_

8. In view of the action you would like taken, do you have any suggestions about material or media that could be substituted that would convey as valuable a picture and perspective of the subject treated and would meet the educational needs of your child and/or other students?

\_\_\_\_\_

\_\_\_\_\_  
Signed \_\_\_\_\_ Date \_\_\_\_\_

Thank you for your time and concern. Please return this completed form to the building principal, who will review its contents and will notify you of the next step in the complaint process.

**Adopted:** 01/09/17  
**Amended:** 11/05/21