

Request for Review of Instructional and Library Media Materials

Type of Material: _____ Book _____ Magazine/Periodical _____ Film _____ Recording _____ Software _____ Other (Please specify) _____

Author _____

Title _____

Publisher _____

Person making complaint _____

Telephone _____ Street Address _____ Town _____

Complaint represents: _____ Self _____ Organization/Group _____

1. To what portion of the material do you object? (Please be specific, cite pages, scenes, etc.) _____
2. What do you feel might be the negative result of reading/viewing/hearing this material? _____
3. For what age group would you recommend this material? _____
4. Is there anything good about this material? _____
5. Did you read/view/hear all of the material? _____ If not, what parts did you read/view/hear? _____
6. Are you aware the professional reviews/judgement of this material? _____
7. What do you believe is the theme and/or intention of this material? _____
8. What would you like the school to do about this material? _____
 _____ Do not assign it to my child?
 _____ Do not assign to any student?
 _____ Withdraw it from the instructional program or library.
9. In its place, what material would you recommend? _____

Signature of Complaint

Date