

CHALLENGE OF INSTRUCTIONAL MATERIALS FORM

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

Author (if known) _____

Title _____

Publisher (if known) _____

Person making complaint: _____

Telephone _____ Street Address _____ Town _____

Complainant represents: ____ Him/herself
____ Organization _____
____ Other 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/head?

6. Are you aware of the professional reviews/judgment 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 it to any students
____ Withdraw it from the library and/or instructional program
____ Refer it to the Educational Media Review Committee for evaluation
9. In its place, what material would you recommend? _____

Signature of Complainant

Date