

Request for Review of Library Materials

Name of person making request: _____ Request Date: _____

Address: _____ Phone: _____

Name of student affected by materials: _____

Relationship of person making request to student: _____

School: _____

Teacher or librarian responsible for materials: _____

Title of Work: _____ Author: _____

Publisher: _____

Did you read or view the material in its entirety? Yes
 No

Identify the content to which you object. Please be specific by citing page numbers, scenes, etc., or quoting specific language.

Please describe the specific nature of your objection and why you find the material to be objectionable.

What part of the materials have you personally read, viewed, or observed?

What do you perceive to be the theme, purpose, and/or merit of using/keeping this material?

At what age level do you find this material appropriate?

Please provide any information you have regarding the materials or instruction by experts in the field. Attach additional documents if necessary.

In its place, what materials of equal educational value (and similar format) would you recommend as an alternative?

In order to be considered, this form must be completed in its entirety and sent to the principal of the building where the material was encountered. Please complete a separate form for any additional challenges.

Signature: _____

Printed name: _____

Date: _____