

Selection, Evaluation, and Adoption of Instructional Materials

Appendix I – Request for Reconsideration of Instructional Materials Form

**REQUEST FOR RECONSIDERATION OF INSTRUCTIONAL MATERIALS
CARROLL COUNTY PUBLIC SCHOOLS
(SUBMIT COMPLETED REQUEST FORM TO THE SUPERVISOR OF LIBRARY MEDIA)**

Type of Media _____

Name of Item _____

Publisher or Producer _____ Publication Date _____

Name of Individual (Appellant) _____ Telephone _____

Address _____

Street

City

Zip

Organization Represented, (if applicable) _____

1. Did you read, view, or listen to the complete item? YES _____ NO _____

Note: The Reconsideration Committee will judge the item on its merits as an entire piece, not by portions or out-of-context selection.

2. How was the item acquired? (assignment, free selection, friend, etc) _____

3. Is the item part of a set or series? YES _____ NO _____

4. What is objectionable regarding this item and why? (Be specific by citing page numbers or passages)

5. Were there any good sections included in this item? YES _____ NO _____ If YES, please list them.

6. What is the educational benefit of this material? (Please provide approximate grade level(s) and ways the item might be utilized.)

7. What do you suggest be provided to replace the item in question?

SIGNATURE OF APPELLANT

DATE