



Application for Reconsideration of Learning Resource (Form 252-1)

The following form shall be used when filing a formal complaint of a print or non-print learning resource on the basis of its appropriateness. This form can be used by a resident, parent/guardian of a child in the District, or employee.

Title of Learning Resource: _____

Details of Resource (author, publisher, producer, etc.): _____

Applicant's Name: _____

Address: _____

City: _____

Email: _____

Telephone: _____

Applicant Represents:

1. Themselves:
2. Parent / guardian of a child:
 - Child's name: _____
 - Child's school: _____
3. Other: please specify: _____

Please provide fulsome answers to the following questions:

1. To what in the material do you object? Please be specific (e.g. pictures, captions, statements). Indicate resource locations where applicable.

2. What do you feel might be the effect on students who may read, view or listen to this material?

3. Did you read, view or listen to the entirety of this learning resource? Yes No

If NO, what parts did you read, view or listen to?

4. How is the material being used in the classroom?

5. What do you believe is the message in the material?

6. Is there anything recommendable about the material?

7. For what age group would you recommend the material?

8. Please indicate if you are aware of any professional judgements of this material.

9. What would you like your school to do about the material?

Do not assign it to my child

Have the school Resource Review Committee re-evaluate the resource

10. What material would you recommend the school consider to better convey the content this resource is attempting to present?

Signature of Applicant

Date