SRSD File: IJL-R2

REQUEST FOR RECONSIDERATION OF LIBRARY MATERIAL

Request initiated by		
Address		
City	State	Zip
Telephone	_	
Complainant represents:		
SelfOrganization or O	Group Name	
Relationship to student and/or sc	:hool	
Title, author, publisher, copyrigh	nt date of material t	to be reconsidered:
Type of Material (book, video, e		
Have you read, viewed, or listen	ed to the entire ma	terial?
What do you object to in the mat and nature of content. (Use addi	-	

SANBORN REGIONAL SCHOOL DISTRICT

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Why do you object to this material?		
Is there anything good about this material?		
Are you aware of the reviews written about this material?		
In its place, what material would you recommend, or what material do you believe should be added to the collection to counterbalance the viewpoints in this material?		
You are entitled to meet with the Reconsideration Committee in order to orally present your concerns.		
Signature of Complainant		
Date		

SAU #17 3/2014