

# REQUEST FOR RECONSIDERATION OF MATERIALS

The Methuen School Committee has authorized the use of this form. Until it is completed and returned to the supervisor of media services, no formal reconsideration of materials will occur.

Request initiated by \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

School involved \_\_\_\_\_

Do you have a child in the school concerned? Yes No

Do you represent:

\_\_\_\_\_ Yourself

\_\_\_\_\_ An organization or group? \_\_\_\_\_ (identify)

## CHALLENGED MATERIAL

Author/Producer \_\_\_\_\_

Title \_\_\_\_\_

Publisher (if known) \_\_\_\_\_

Copyright Date (if known) \_\_\_\_\_

Type of material

\_\_\_\_\_ Book \_\_\_\_\_ Newspaper \_\_\_\_\_ Online

\_\_\_\_\_ Magazine \_\_\_\_\_ Audiovisual \_\_\_\_\_ Other

What brought this material to your attention?

\_\_\_\_\_  
\_\_\_\_\_

Did you examine the material in its entirety?

\_\_\_\_\_  
\_\_\_\_\_

If not, what part did you examine?

\_\_\_\_\_

To what do you object? Please be specific and cite passages and pages.

---

What do you feel might be the result of using this material?

---

Would you recommend this material for a different age group? If so, for what group?

---

Is there anything good about this material?

---

What do you believe is the theme or purpose of this material?

---

---

Are you aware of professional evaluations of this material?

---

What would you like your school to do about this material?

---

---

What resources do you suggest to replace or to provide additional information on this topic?

---

---

Would you like to appear before the materials review committee?

---

Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature of Person Receiving the Completed Form \_\_\_\_\_

Date \_\_\_\_\_