

**REGULATION
REQUEST FOR RECONSIDERATION
OF INSTRUCTIONAL MATERIALS**

**The Tonkawa Public Schools
Request for Reconsideration of Instructional Materials**

Author _____ Type of material _____

Title _____

Publisher (if known) _____

Request initiated by _____ Date _____

Telephone _____ Address _____

City/State _____ Zip Code _____

Complainant represents: _____ Self
_____ Other group (identify) _____

1. To what do you object? Please be specific. Cite pages or item. _____

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

3. For what age group would you recommend it? _____

4. Is there anything good about it? _____

5. a. Did you read the entire book? _____ What parts? _____

b. Did you view and/or listen to the entire material? _____
If not, what parts did you examine? _____

6. Are you aware of professional evaluations of this material? _____

7. What do you believe is its purpose or theme? _____

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

_____ Do not assign it to my child

_____ Withdraw it from all students as well as from my child

9. What would you recommend to replace it? _____

Date _____ Signature of Complainant _____