

Marlborough Public Schools

Request for Reconsideration of School Library Media Materials

(to be completed by complainant and returned to the Building Principal)

Date: _____

Name of person making request: _____

Address: _____ Telephone: _____

City: _____ State: _____ Zip Code: _____

Complainant Represents:

Self _____ Organization or Group (please identify) _____ -

Name of school owning challenged material: _____

Do you have a child in this school? _____ Grade: _____

Title of item: _____

Please select material type:

- Book
- Magazine
- Electronic Material
- Other _____

Author/artist/composer: _____

Publisher/producer, if known _____

How did you acquire this item? _____

Did you read, view, or listen to the entire item?

Yes or No (circle one)

If not, what parts? _____

To what in the item do you object? Please be specific, cite pages, frames, etc.

Attachment C

What do you think might be the result of a student's reading, viewing, or listening to this item?

Are you aware of any evaluations of this item by authoritative sources? Yes or No (circle one)

If yes, did those sources agree with your opinion? Please list the sources.

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

Other comments: _____

Signature of complainant: _____

Please return to the building principal