

Request For Reconsideration Of Materials

This form is intended to initiate a formal review process if you have concerns after speaking with the person providing the materials in question. Please complete this form in its entirety and return it to the Principal of the school. A copy of this form will be sent to the Superintendent.

Your Name	
Address	
Phone	
Email	

How are you associated with the school district? (i.e., parent, community member, employee, student)	<input type="checkbox"/> Parent/Guardian <input type="checkbox"/> Student <input type="checkbox"/> Employee <input type="checkbox"/> Community Member
Where did you or your student encounter this material/resource?	School: Grade:

Materials Description

Material	<input type="checkbox"/> Book <input type="checkbox"/> Movie <input type="checkbox"/> Magazine <input type="checkbox"/> Digital Content Other _____
If printed material, please provide the following information:	
Title	
Author	

If other material, please identify:

Title

Material Description

Request for Reconsideration

- ☐ I have read/viewed in full the material to which I object.
- ☐ I have read the South Portland's Instructional and Library Materials Selection policy (IJJ.)

1. What is your objection to this material?

2. What action would you recommend in regards to this material?

Please attach any relevant supporting documentation you would like the review committee to consider.

Signature of Complainant _____ Date _____

If you require a translation of this document, please contact the building principal.