Germantown Municipal School District
Forest Hill Elementary School

FEEDBACK FORM - GMSD Policy 4.403

Formal Request for Reconsideration of Library Collection Materials

Name of Material:

_____

Publisher_____Publication Date _____

Name of Individual GMSD Student, GMSD Parent/Guardian, or GMSD School Employee:

[redacted]

Telephone _____

Address_____

City_____Zip_____

Please check the applicable category for the individual completing this form:

_____GMSD Student _____GMSD Parent or Guardian _____GMSD School Employee

1. Did you read, view, or listen to the complete item? Yes _____ No _____
Note: The Reconsideration Committee will judge the item on its merits as an entire piece, not by portions or out-of-context selection.

2. How was the item acquired? (ex., assigned by teacher, library book, etc.)

_____
_____

3. What is objectionable regarding this item and why? (Be specific by citing page numbers or passages)

_____
_____
_____
_____
_____
_____

[redacted] _____

SIGNATURE OF GMSD STUDENT, GMSD PARENT/GUARDIAN, OR GMSD SCHOOL EMPLOYEE

DATE

E-mail this form to: jennifer.mock@gmsdk12.org

The Library Collections Committee will review this feedback in accordance with GMSD Policy 4.403.