



# Request for Reconsideration of Instructional/Library Materials

Complete the form below to request a reconsideration of AACPS instructional or library materials. This information is required in order to give consideration to the materials in question. Please return the completed form to the principal of the school involved.

**Please Print Clearly**

Name of person, organization, group or community seeking reconsideration

Street Address City State ZIP Code

Primary Phone Email address

Type of instructional materials/library				
<input type="checkbox"/> Book (e-book)	<input type="checkbox"/> Movie	<input type="checkbox"/> Magazine	<input type="checkbox"/> Newspaper	<input type="checkbox"/> Other _____
<input type="checkbox"/> Digital Resource	<input type="checkbox"/> Textbook	<input type="checkbox"/> App	<input type="checkbox"/> Audio Recording	
<input type="checkbox"/> Streaming Media	<input type="checkbox"/> Graphic Novel	<input type="checkbox"/> Database	<input type="checkbox"/> Game	

Title

Publisher or Producer Publication Date

- Did you read, view or listen to the complete item?  Yes  No
- Did you discuss with the principal or administrator at the school?  Yes  No
- How was the item acquired? (assignment, free selection, from a friend, etc.)  
\_\_\_\_\_  
\_\_\_\_\_
- Is the resource part of the curriculum, library collection, book club or other?  
\_\_\_\_\_  
\_\_\_\_\_
- What did you find objectionable about the item and why? *Please be specific.*  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- Did you locate reviews of the item?  Yes  No  
*(f yes, please cite them; use back if necessary)*
  - 
  - 
  - 
  - 
  - 
  -