

# Phoenix-Talent Schools District 4

Code: IIA-AR  
Revised/Reviewed: 2/17/22; 8/11/22



## Challenge Request for Instructional Materials

(Submit to superintendent)

Title: \_\_\_\_\_ Publisher: \_\_\_\_\_ Date of Pub.: \_\_\_\_\_

Author \_\_\_\_\_

Who is using this material and/or where is it found? \_\_\_\_\_

Type of media:  Hardcover  Paperback  Digital  Other: \_\_\_\_\_

Producer/Source (if known): \_\_\_\_\_

Request initiated by: \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Person making the request represents:  Self  Group or organization

Name of Group (or organization): \_\_\_\_\_

1. To what in the item do you object? (Please be specific and cite pages, frames, etc.)  
\_\_\_\_\_  
\_\_\_\_\_

2. In your opinion, what are the harmful effects upon students that might result from the use of this item?  
\_\_\_\_\_  
\_\_\_\_\_

3. Do you perceive any instructional value in the use of this item?  
\_\_\_\_\_  
\_\_\_\_\_

4. Did you review the entire item?  Yes  No

5. If not, what sections did you review? \_\_\_\_\_  
\_\_\_\_\_

6. Should the opinion of any additional experts in the field be considered?  Yes  No

7. Please list suggestions, if any: \_\_\_\_\_

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

- Do not use it with my student.
- Withdraw it from use.
- Send it back to the selector or selectors for evaluation.
- Other \_\_\_\_\_.

9. In place of this item, would you care to recommend other material which you consider to be of equal or superior quality for the purpose intended?

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10. Do you wish to make an oral presentation to the Review Committee?  Yes  No

If yes, please call the superintendent's office at 541-535-1517.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**References:**

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