

Morrow County School District

Code: **IIA-AR(3)**
Adopted: 5/14/18

Challenge Request for Instructional Materials
(Submit to superintendent)

Title: _____ **Publisher:** _____ **Date of Pub.:** _____

Author _____

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

If not, what sections did you review?

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

Please list suggestions, if any:

6. 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

7. 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?

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

If yes, please call the superintendent's office at 1-541-676-9128.

Signature

Date

References: