## FORM

## EAST STROUDSBURG AREA SCHOOL DISTRICT CITIZEN'S REQUEST FOR RECONSIDERATION OF TEACHING MATERIALS

	of Material:
] в	ook 🔲 Video Recording 🔲 Film 🔲 Audio Recording 🔲 Other (Please specify)
utho	r (if known)
itle _	
ublisl	ner (if known)
opyri	ght Date
eque	st initiated by (Please give your name)
ersor	represents:
	Oneself
	Organization (Name)
	Other Group (Name)
1.	Have your read or viewed this material in entirety? If not, what parts have your read or seen?
2.	What do you believe is the theme or main idea in this material?
3.	To what in the material do you object? Please be specific, cite pages.
4.	What do you feel might be the result of exposure to this material?
5.	Is there any age group for which you recommend this material?
6.	Is there anything good about this material?
7.	If there anything good about this material by critics?
8.	Which of the following would you like the school to do with this material?
	Refrain from assigning it to your child
	Withdraw it from all students
	Other (Please specify)
	In its place, what material, if any, would you recommend that would convey as valuable a picture and
9.	