

**REQUEST FOR FORMAL RECONSIDERATION OF LEARNING RESOURCES FORM**

**Request initiated by** \_\_\_\_\_  
**Address** (*street, postal code*) \_\_\_\_\_  
**Email Address** \_\_\_\_\_  
**Telephone (Home)** \_\_\_\_\_ **Telephone (Work)** \_\_\_\_\_  
**Name of School** (*where the learning resource is used*) \_\_\_\_\_  
**Originator of the Complaint Represents** \_\_\_\_\_  
*(self, organization, group, school)*

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**Title for Reconsideration** \_\_\_\_\_  
**Author/Illustrator** \_\_\_\_\_  
**Publisher/Producer** \_\_\_\_\_  
**Type of Resource** \_\_\_\_\_  
*(book, magazine, audio, video, visual, person, community resource, Internet-based, other)*

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**Please respond to the following questions regarding the learning resource for reconsideration:**

1. What brought this resource to your attention? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
  
2. Did you read, listen to, or view the entire resource?    YES \_\_\_\_\_    NO \_\_\_\_\_  
 If not, what section(s) did you read, listen to, or view?  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
  
3. To what do you object? Please be specific (identify page numbers, passages, visuals, audio or video excerpts, web sites, etc.)  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
  
4. What of value is there in this resource?  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
  
5. During your informal discussions with school personnel, what reasons were provided for the inclusion of this resource in the instructional program?  
 \_\_\_\_\_  
 \_\_\_\_\_

6. In what way did you find these reasons unsatisfactory?

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7. Are you aware of any professional assessments of this resource by literary or media reviewers or educators? If yes, please provide the sources you have consulted.

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8. What do you request the school and/or division do about this resource?

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\_\_\_\_\_  
Signature of Originator

\_\_\_\_\_  
Date

(This form is to be completed in full, signed by the originator, and returned to the school principal within 5 days of the conclusion of the informal review).