

[Insert school name here]

REQUEST FOR RECONSIDERATION OF LEARNING RESOURCES

Initiated by _____

Telephone _____ Address _____

REPRESENTING

Self _____ Organisation(give name) _____

RESOURCE QUESTIONED

Type of resource (book, video etc) _____

Author _____

Title _____

Publisher _____

Please respond to the following questions, if insufficient space, attach additional sheet.

1. Did you read/view the entire item? _____ If not, what sections did you review

2. To what do you object? Please be specific _____

3. What do you believe is the main idea of this material? _____

4. What do you feel might be the result of a student using this material? _____

5. Is there anything good about this material? _____

6. Are you aware of the judgement of this material by professional critics? _____

7. In your opinion, for what age group would this material be more appropriate? ____

8. In the place of this material, would you care to recommend other material that you consider to be more appropriate? _____

Date _____

Signed _____