

Appendix A
Covington County Schools
REQUEST FOR FORMAL REVIEW OF LIBRARY MATERIALS
(Challenged Materials)

School: _____ Type of Material (book, video, etc.) _____

Title: _____

Author: _____

Publisher or Producer: _____

Name of Complainant: _____ Telephone: _____

Complainant represents: Himself/Herself _____ Name of Organization _____

Complainant's Address: _____

City: _____ State: _____ Zip: _____

Before the following questions are answered, it is recommended that the complainant read, view, or listen to the school library material in its entirety. If sufficient space is not provided, attach additional sheets. Please sign your name to each additional sheet.

1. **Have you read, viewed, or listened to this material in its entirety?** _____ Yes _____ No
2. **What do you believe is the theme of this material?** _____

3. **To what in the material do you object?** (Please be specific: cite pages, film sequence, etc.)

4. **What do you feel might be the effect on a student using this material?** _____

5. **For what age group would you recommend this material?** _____
6. **Is there anything good in this material?** Please comment. _____

7. **What would you like the school to do about this material?**
 _____ Do not assign to my child.
 _____ Withdraw it from all students as well as my child.
 _____ Send it back to the proper department for re-evaluation.

 Signature of Complainant

 Date

Please return completed form to the school principal. Thank you.