CITIZEN'S REQUEST FOR RECONSIDERATION OF INSTRUCTIONAL MATERIALS

		Date:
TITL	Æ:	
AUTH	TOR:	
PUBLISHER:		DATE OF EDITION:
Request received by:		Title:
Citizen's Name:		Phone:
Citizen Represents: Himself/Herself		Organization or Group:
1.	To what do you object? (Please be specific video frame, and words)	: cite pages, tape sequence,
2.	What do you feel would be the result of reading/viewing this material?	
3.	For what age group would you recommend this material?	
1.	Did you read/view the entire selection?	
5.	If not, what percentage did you read/view, or what parts?	
5.	Is there anything good about this materia	1?
7.	What would you like the school to do abou	t this material?
	 □ Do not assign it to my child. □ Withdraw it from all students. □ Re-evaluate it. 	
8.	What do you believe is the thesis of this work?	
9.	In its place, what work would you recomme	nd?
	Signature of ci	tizen
Acti	ion taken	Date
	CULVER CITY	UNIFIED SCHOOL DISTRICT Culver City, California