

Warren County School District

Citizen's Request for Reconsideration of an Adopted Book or Materials

Title: _____

Author: _____

Hard Cover: _____ Paperback: _____

Publisher (if known): _____

Course: _____ Grade Level: _____

Request initiated by: _____

Telephone: _____ Address: _____

City: _____ Zone: _____

Complainant represents: Herself/Himself: _____

Name/Organization: _____

Identify other group: _____

1. To what in the book do you object (please be specific; cite pages)?
2. What do you feel might be the result of reading this book?
3. For what age group would you recommend this book?
4. Is there anything good about this book?
5. Did you read the entire book? _____
If not, what parts did you read?
6. Are you aware of the judgment of this book by literary critics?
7. What do you believe is the theme of this book?
8. What would you like your school to do about this book?
_____ Do not assign it to my child.
_____ Withdraw it from all students as well as from my child.
_____ Send it to the textbook committee for evaluation.
9. In its place, what book of equal literary quality would you recommend that would convey as valuable a picture and perspective of our civilization?

Send Request to:
Office of the Superintendent
Warren County School District
589 Hospital Drive, Suite A
North Warren, PA 16365

The Warren County School District does not discriminate on the basis of race, color, national origin, sex, disability or age in its programs, activities or employment practices and provides equal access to the Boy Scouts and other designated youth groups. Inquiries may be directed to Mrs. Amy Stewart, Title IX/Section 504 Coordinator at 589 Hospital Drive, Suite A, Warren, PA 16365 or (814) 723-6900.