

## REQUEST FORM FOR REEVALUATION OF GILMAN SCHOOL LIBRARIES MATERIALS

Initiated by \_\_\_\_\_

Telephone \_\_\_\_\_

Address \_\_\_\_\_

### *REPRESENTING*

Self \_\_\_\_\_ Organization or group (list name) \_\_\_\_\_

School \_\_\_\_\_

### *MATERIAL QUESTIONED*

Book or other print material:

Author \_\_\_\_\_

Title \_\_\_\_\_

Copyright date \_\_\_\_\_

Nonprint Material:

Format (video, DVD, record, cassette) \_\_\_\_\_

Title \_\_\_\_\_

Other Material

Identify \_\_\_\_\_

Please respond to the following questions. If sufficient space is not provided, please use an additional sheet of paper.

1. Have you seen or read this material in its entirety?

2. To what do you object? Please cite specific passages, pages, etc.
  
  
  
  
  
  
  
  
  
  
3. What do you believe is the main idea of this material?
  
  
  
  
  
  
  
  
  
  
4. What do you feel might result from use of this material?
  
  
  
  
  
  
  
  
  
  
5. What reviews of this material have you read?
  
  
  
  
  
  
  
  
  
  
6. For what other age group might this be suitable?
  
  
  
  
  
  
  
  
  
  
7. What action do you recommend that the school take on this material?
  
  
  
  
  
  
  
  
  
  
8. In its place, what material do you recommend that would provide adequate information on the subject?

Date \_\_\_\_\_ Signature \_\_\_\_\_