

RED WING PUBLIC SCHOOLS REQUEST REVIEW OR RECONSIDERATION OF LIBRARY OR INSTRUCTIONAL MATERIAL

	Email		
Address	City and State	Zip Code	
Name of Child:	School:		
(If request is from a parent o	r guardian)		
Гitle	Type of Mat	erial	
	Copyright		
	the material? Yes No I am requesting to led it, please summarize it.	to review material	
		to review material	
If you have read or viewed. 2. Have you conferred with			
If you have read or viewed. 2. Have you conferred with Yes □ No □ Date 3. Explain the purpose of the material, as described by	ed it, please summarize it. the principal and school staff member(s) regarding	this material?	

1.	Please cite page numbers or location and specific information in the material to support your objections.	



RED WING PUBLIC SCHOOLS REQUEST FOR RECONSIDERATION OF LIBRARY OR INSTRUCTIONAL MATERIAL continued

6. How do you perceive students would be affected by this material?	
7. In its place, what material of equal educational quality would you recommend?	
8. What would you like the school to do about this material?	
Do not assign it to my child.	
Do not use the material in the school.	
Other (Please explain).	
I have received a copy of the current version of Policy 606. (Please initia	l)
Signature Date	