

REQUEST FOR RECONSIDERATION LIBRARY MATERIALS

[*Note, parents/guardians may direct that specific library materials not be checked out to their child by utilizing the Opt-Out Form available at school libraries and on the District website]

Library materials consist of print or digital items including but not limited to books, handouts, audio/video recordings, streaming media, and images, that may or may not be published. A separate form must be submitted for each item.

To Request a Reconsideration of library materials you must have read or listened/watched the material in its entirety.

Name of Parents/Guardians _____

Name and grades of children in the District _____

Date of Meeting with School Librarian/Principal _____

Location of material (school) _____

Type of material _____

Title of item _____

Author/Artist/Composer/Other _____

Publisher or Producer (if known) _____

Copyright Date _____

Request initiated by _____

1. Have you previously submitted a "Request for Reconsideration" of Library Materials?
_____ Yes _____ No

Have you read the LIBRARY BILL OF RIGHTS (IJL-E1)?
_____ Yes _____ No

Are you familiar with the current policy regarding selection of library materials in Sheridan County School District #2 (Policy IJL)?
_____ Yes _____ No

2. Before submission of this form, you must read or view the disputed item in its entirety. Have you observed/read/listened to the material in its entirety?
_____ Yes _____ No

3. What specific material do you object to? (Please be specific, cite pages etc.)

4. What brought this item to your attention?

5. Are there any worthwhile or any redeeming qualities in this material? _____

6. What do you feel might be the result of reading/viewing/listening to this material? _____

7. Have you had the opportunity to become familiar with any reviews of this material by literary, aesthetic, or scientific critics? _____ Yes _____ No

If yes, please list the sources/dates of the reviews and the names of the critics along with the findings (attach documentation if necessary.)

8. What do you believe to be the central theme or purpose of this material? _____

9. For what age group would you recommend this material?

10. What would you like done with this material?

Print name _____

Address _____

City/State/Zip _____

Telephone number _____

Signature _____

Date _____

RETURN COMPLETED FORM TO: Superintendent of Schools
Sheridan County School District #2
201 N Connor St.
Sheridan, Wyoming 82801

First Reading: 4-10-23

Second Reading: 5-1-23