

Policy 602.28-E1

Request to Prohibit a Student From Accessing Specific Instructional and Library Materials

Request to prohibit a student from checking out certain instructional materials to be submitted to the superintendent. Please complete one form per student

REQUEST INITIATED BY:

Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Name of Student: _____

School: _____ Grade Level: _____

Requestor's Relationship to Student: *(Must be parent/legal guardian)*

BOOK OR OTHER PRINTED MATERIAL TO PROHIBIT STUDENT FROM ACCESSING:

Author: _____ Hardcover ___ Paperback ___ Other ___

Title: _____

Publisher (if known): _____

Date of Publication: _____

MULTIMEDIA MATERIAL TO PROHIBIT STUDENT FROM ACCESSING:

Title: _____

Producer (if known): _____

Type of Material (filmstrip, motion picture, etc.): _____

Requestor's Signature: _____ **Date:** _____