



## Media Center Materials Appeal Form

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Zip: \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Do you represent yourself? \_\_\_\_ Or an organization? \_\_\_\_ Name of organization \_\_\_\_\_

### Resource on which you are commenting:

Title \_\_\_\_\_

Author/Producer \_\_\_\_\_

1. What brought this material to your attention?
2. Did you read/view/listen to the entire material? \_\_\_\_\_ If not, please do so before continuing.
3. What do you object to in the material? (Please be specific; cite sections or pages)
4. What do you think might be the result of reading/viewing/listening to this material?
5. What action are you requesting the committee consider?
6. In its place, what material of equal quality and topic would you recommend?
7. Have you been through any steps of the appeal process for this material in Forsyth County Schools? If so, explain the process and results in detail:

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