## Appendix 1



## ST. JOHNS COUNTY SCHOOL DISTRICT

Instructional Resources and Media Services
10 Hildreth Drive
St. Augustine, Florida 32084
Telephone (904) 547-3947 FAX (904) 547-3950
Kimberly Clark-Dixon
Director

This form must be submitted, with petitioner's signature, to the SJCSD Instructional Resources and Media Services Department for consideration.

## **Request for Reconsideration of Instructional Materials**

Request initiated by:				
Telephone:				
Email:				
Physical Address:				
City:	State:	Zip:		
Student's school of attendance & grad	le level (if applicable	):		
Please select the type of material:				
() Book() Non-print material_	( ) Other			
Title:				
Subject:				
Publisher:				
The following questions must be answ student or a resident of St. Johns Cour instructional material in its entirety. It additional sheets. (Please sign your na	nty, who has read, vion f sufficient space is n	ewed, or listened to the ot provided, attach		
What is objectionable about the mater etc.)	rial? (Please be specif	fic, cite pages, chapters,		

What negative impact, if any, do y material?	you feel would result from students	using this
What aspects of this material did	you consider appropriate for student	use?
Would you care to recommend an addresses the same content standa	alternative to this instructional materials in the same format?	erial that
Printed name of Complainant: Signature of Complainant: Date:		
Please submit the completed form		
Instructional Resources and Medi- Attn: Kimberly Clark-Dixon, Dire		
St. Johns County School District	Ciui	
10 Hildreth Drive		

St. Augustine, FL 32084

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