Any resident of Davidson County or employee of the District may review and raise objections to instructional materials/textbooks, supplementary materials, library books, audiovisual/multimedia materials, computer software, instructional telecasts, and media/materials used in student performances and fine arts.

When a complaint for reconsideration of media/materials is received, procedures providing a system for addressing the complaint are addressed in IMp 4.104-Processing Complaints Regarding Instructional Media and Materials.

**References/Authority**
IMp 4.104- Processing Complaints Regarding Instructional Media/ and Materials.
Appendix A- Citizens Request for Reconsideration of Media (Print and Non-Print)
CITIZENS REQUEST FOR RECONSIDERATION OF MEDIA/MATERIALS 
(PRINT AND NON-PRINT)

List type of media (textbook, library book, supplementary book, audiovisual, computer 
software, instructional telecast, performing arts or fine arts (plays)):

________________________________________________________

TITLE: ______________________________________________________________________

AUTHOR: _____________________________________________________________________

PUBLISHER/PRODUCER: ___________________________________________________________________

Request initiated by: ___________________________________________________________________

Address: _______________________________________________________________________

Telephone: _______________________________________________________________________

Complainant Represents: _____Herself/Himself   _____Organization

Name of Organization/Group: _______________________________________________________________________

1. To what medium do you object (Cite pages, segment of video, or other specifics)?

_______________________________________________________________________________

_______________________________________________________________________________

_______________________________________________________________________________

_______________________________________________________________________________

_______________________________________________________________________________

_______________________________________________________________________________

_______________________________________________________________________________

_______________________________________________________________________________

_______________________________________________________________________________
CITIZENS REQUEST FOR RECONSIDERATION OF MEDIA
(PRINT AND NON-PRINT)

2. Did you read or view the entire medium? ______Yes  _____No
   If not, which parts did you read or view? __________________________________________
   __________________________________________
   __________________________________________
   __________________________________________
   __________________________________________

3. What do you think is the major idea of this medium?
   __________________________________________
   __________________________________________
   __________________________________________
   __________________________________________
   __________________________________________

4. What do you feel might be the result of using this medium?
   __________________________________________
   __________________________________________
   __________________________________________
   __________________________________________
   __________________________________________
CITIZENS REQUEST FOR RECONSIDERATION OF MEDIA (PRINT AND NON-PRINT)

5. For what age group would you recommend this medium?
________________________________________________
________________________________________________
________________________________________________
________________________________________________

6. What would you like the school and/or school system to do about this medium?
   ______ Place at different grade level    ______ Withdraw from all students

7. Other comments:
________________________________________________
________________________________________________
________________________________________________
________________________________________________

Date: ________________

Signature: ________________

(Return completed form to the principal of the school in question or to the Chief Academic Officer of Metro Schools 615-484-9891).