Logan City School District Request for Reconsideration of Media Materials

Date			
Name			
School			
Phone	Email		
Do you represent self?	Or an organization?	Name of Organization	on
Resource on which you a	_	rtame or organizant	··-
resource on which you a	ic commenting.		
Book (e-book)	Database	Textbook	Game
Movie	Audio Recording	App	Streaming Media
Magazine	Digital Resource	Newspaper	Other
Title			
Author/Producer Where is the resource being 2. What brought this resou	ng used (i.e. classroom o		ction, or other)?
3. Have you examined the	entire resource? If not, v	what sections did you r	review?
4. What concerns you abo	ut the resource?		
5. Are there alternative resviewpoints on this topic?	ources you would sugge	est, to provide addition	al information and/or other
6. What action(s) are you ւ	requesting the committee	e to consider?	