



**Seminole County Public Schools, Florida**  
**Objection to Instructional and/or Media Material**

School \_\_\_\_\_

Please check type of material:

( ) Book ( ) AV (Video, CD, etc.) \_\_\_\_\_ Other (Identify) \_\_\_\_\_

Title \_\_\_\_\_

Author \_\_\_\_\_

Publisher or Producer \_\_\_\_\_

Request initiated by \_\_\_\_\_

Telephone \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**It is expected that the material in question has been read, viewed, or listened to in its entirety. Please complete the following questions. If insufficient space is provided, attach additional sheets.**  
 (Please sign your name to each additional attachment.)

1. What brought this material to your attention? \_\_\_\_\_  
 \_\_\_\_\_
2. Did you examine the entire material? ( ) If not, what parts did you examine? \_\_\_\_\_  
 \_\_\_\_\_
3. To what in the material do you object? (Please be specific. Cite pages, film sequence, etc.)  
 \_\_\_\_\_
4. What do you believe is the theme or purpose of this material? \_\_\_\_\_  
 \_\_\_\_\_
5. What do you feel might be the result of a student using this material? \_\_\_\_\_  
 \_\_\_\_\_
6. For what age group would you recommend this material? \_\_\_\_\_
7. In your opinion, is there anything of value in this material? \_\_\_\_\_  
 \_\_\_\_\_
8. Have you read any critical reviews of this material? If so, what? Please be specific. \_\_\_\_\_  
 \_\_\_\_\_
9. What would you like the school to do about this material? Check your choice.  
 \_\_\_\_\_ Do not assign it to my child.  
 \_\_\_\_\_ Other (Please explain).  
 \_\_\_\_\_

\_\_\_\_\_  
 Signature of Objector

\_\_\_\_\_  
 Date (M/D/Y)