

**Frederick County Public Schools**  
191 South East Street  
Frederick, Maryland 21701

**Request for Reconsideration of Instructional Material**

Complainant's Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

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

Title of Instructional Material \_\_\_\_\_

Author \_\_\_\_\_ Type of Material \_\_\_\_\_

Publisher or Producer (if known) \_\_\_\_\_

Name of school where this material is in use \_\_\_\_\_

1. What are your general objections to the instructional material? \_\_\_\_\_

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2. What are your specific objections to the instructional material? (Please cite concerns.) \_\_\_\_\_

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\_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Complainant

**Return completed form to:**

Deputy Superintendent, Frederick County Public Schools, 191 South East Street, Frederick, MD 21701