

**REVIEW COMMITTEE DECISION**

(Refer to Policy 6078.00 C.)

This form is to be filled out by the Review Committee. Please attach a copy of the “Request for Review of Educational Materials,” the “Sensitive material Parent Permission” form, if used, and the “Rationale for Use of Instructional Material.”

Material subject to objection \_\_\_\_\_

Please state each objection to the material and your findings:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Attach additional information.

**Committee Members**

Signature	Date	Signature	Date
1. _____	_____	4. _____	_____
2. _____	_____	5. _____	_____
3. _____	_____		

TEACHER/LIBRARIAN/COMPLAINANT: I have been informed of the Review Committee’s decision.

\_\_\_\_ I wish to appeal this decision to the Board of Trustees.

\_\_\_\_ I do not wish to appeal this decision.

\_\_\_\_\_  
Signature Date

Return this form to the building principal within ten (10) days of receipt.

(5-30-02)