

SCHOOL DISTRICT 36 (SURREY) CHALLENGE OF A PROVINCIALLY RECOMMENDED OR LOCALLY APPROVED LEARNING OR LIBRARY RESOURCE

Name of School	Phone #
Contact Name	
Role of Person Initiating Challenge: District Employee Parent	t/Guardian Student
Other (please specify)	
Telephone Numbers: Home	Work Cell
Address:	
Title of Resource	
Author(s)	
Type of Resource: Ministry Approx	ved Locally Approved
Context of Usage: Classroom	Library
1.Have you reviewed the entire resource	ce? Yes No
2.What is your objection to the resourc	e?
a) page(s) Specific Objection	
b) page(s) Specific Objection	
c) page(s) Specific Objection	

3. From your point of view, what do you think is the theme or purpose of the resource? 4. Please describe what, in your opinion, there is of value in this material. 5. What positive or negative effects do you believe this resource would have on your son or daughter? 6. What positive or negative effects do you believe this resource would have on other students? 7. For what age group, if any, would you recommend this material? 8. In many cases, the impact of a resource will vary according to how it is presented and interpreted in the classroom, and we urge you to discuss this material with the appropriate people. Have you discussed the resource with: • the teacher-librarian? No Yes No • the classroom teacher? • the principal? Yes No Have you read reviews of this resource: Yes No (if so, please note source of review and attach photocopies if available) What is your recommendation regarding this resource? (a) do not recommend or assign it to my child withdraw it from all student use (b)

other (please specify):

Further information may be attached.

do not use with age group it is recommended for have it further evaluated by educational staff

Regulation: 8800.2-1 Rev. 2019 Form #:11305.20

(c)

(d)

(e)

Complete form and forward to:	 1 copy to Principal of school concerned 1 copy to Director of Instruction responsible for Library/Learning Resource 1 copy to the person issuing challenge
Note to challenger: Please keep a copying service if necessary.	copy for your records. Your child's school can provide
Signed:	
Dated:	<u></u>

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