



**Curriculum Objection**

*Please complete this form and return it to the Site Principal who will submit it to the Director of Curriculum and Learning: Please print and complete the form.*

Subject Area \_\_\_\_\_

Classroom Teacher \_\_\_\_\_

How did you become aware of the curriculum area, instructional material, or program?

By classroom observation

By word-of-mouth

By review

Other \_\_\_\_\_

Standards covered: \_\_\_\_\_

Please state, as precisely as possible, the specific curriculum area, instructional material, or program to which the user objects (name, title, author, and any other identifying information).

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

Please describe what curriculum area, instructional material, or program do you object?

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

Do you want your child excluded from participation?    \_\_\_ YES    \_\_\_ NO

In place of participation in the curriculum area, what course of study would you recommend for your child? \_\_\_\_\_

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

Complainant represents:    \_\_\_ Student    \_\_\_ Parent/Guardian  
  \_\_\_ Other \_\_\_\_\_

Complainant Name (please print) \_\_\_\_\_

Telephone Number \_\_\_\_\_

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

Date \_\_\_\_\_

Date Received: \_\_\_\_\_ Date Resolved: \_\_\_\_\_ by: \_\_\_\_\_