

BARRINGTON PUBLIC SCHOOLS
Barrington, Rhode Island 02806

**CITIZEN'S REQUEST FOR RECONSIDERATION OF INSTRUCTIONAL
RESOURCES**

Name:

(print)

Date:

Address:

Telephone Number:

Do you represent self?

Organization?

1. Resource on which you are commenting.
2. What brought this resource to your attention?
3. Have you examined the entire resource?
4. What concerns you about the resource? (use other side or additional pages if necessary)
5. Are there resource(s) you suggest to provide additional information and/or other viewpoints on this topic?

Signature of Complainant