Instruction

Exhibit - Curriculum Objection

Please complete this form and return it to the Building Principal or Program Coordinator who will submit it to the Cooperative Complaint Manager. Please print.

_____ _____
Subject area Classroom teacher

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

_____

_____

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

☐ by classroom observation ☐ by review
☐ by word-of-mouth ☐ other_____

To what in the curriculum area, instructional material, or program do you object? Be specific.

_____

_____

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 name (*please print*) Telephone

Complainant represents: ☐ Student ☐ Parent/guardian of student
☐ Other _____

_____
Complainant address

_____ _____
Signature of complainant Date

Implemented: 11/2012

Updated: 8/2018