June 2021 6:260-E

# Instruction

## Exhibit - Curriculum Objection

*Please complete this form and return it to the Building Principal, who will submit it to the District Complaint Manager. Please print.*

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|  |  |  |
| 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*).

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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.

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Do you want your child excluded from participation? Yes No

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| In place of participation in the curriculum area, what course of study would you recommend for your child? |
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|  |  |  |
| Complainant name (*please print*) |  | Telephone |
| Complainant represents: | ☐ Student | ☐ Parent/guardian of student |
|  | ☐ Other |  |
|  |  |  |
| Complainant address |  |  |
|  |  |  |
| Complainant signature |  | Date |