## Checklist for Reconsideration of Instructional Materials

**Note to administrator:** This checklist is for use by the committee and shall be used to create the report provided to the complainant

Тур	e of r	esource:			
Title	e:				
Aut	hor/P	roducer:			
1.	Pur	pose			
	a.	What is the overall purpose of the material or resource?			
	b.	Is the purpose accomplished?			
		□ Yes			
		□ No			
		Additional elaboration			
2.	Authenticity				
	a.	Is the author or presenter competent and qualified in the field?			
		□ No			
		Additional elaboration			
	b.	What is the reputation and significance of the author or publisher/producer in the field?			
	C.	Is the material or resource up to date?			
		□ Yes			
		□ No			
		Additional elaboration			

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	d.	Are information sources well documented either in the resource or in guides?				
		□ Yes				
		□ No				
		Additional elaboration				
	e.	Are translations and interpretations faithful to the original?				
		□ Yes				
		□ No				
		Additional elaboration				
3.	Appropriateness					
	a.	Does the resource promote the educational goals and objectives of the school district?				
		□ Yes				
		□ No				
		Additional elaboration				
	b.	Is it appropriate for the level intended?				
		□ Yes				
		□ No				
		Additional elaboration				
	C.	Are the illustrations appropriate for the subjects and age levels?				
		□ Yes				
		□ No				
		Additional elaboration				

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4.	Con	tent
	a.	Is the content of this material or resource well presented by providing adequate scope, range, depth, and continuity?
		□ Yes
		□ No
		Additional elaboration
	b.	Does it present information not otherwise available?
		□ Yes
		□ No
		Additional elaboration
	C.	Does it give a dimension or direction that is new or different from others available for the subject?
		□ Yes
		□ No
		Additional elaboration
5.	Revi	iew/Evaluations
	a.	Source of review/evaluation:
		□ Favorably reviewed
		□ Unfavorably reviewed
	b.	Does this title or resource appear in one or more reputable selection aids? (If yes, please list titles of selection aids.)
		□ Yes
		□ No
Addi	tiona	Il comments:

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Recommendations by review committee for treatment of questioned resource:				
Signatures of review committee:				
Chairperson:				
Date:				

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