HCPS Objection to the use of Specific Material Form
(*This form will be used until the State Board of Education rule is released per section 1006.28, Florida Statutes.*)

The Objection process begins with a conversation with the Principal, Media Specialist or Teacher at the specific school site. This Objection Form may be submitted if the Objecting Party is not content with the school site’s proposed resolution.

Objecting Party (The Objecting party must be a parent or a resident of Hillsborough County.)

Name: __________________________________________ Telephone: ________________________________________________

Address: ________________________________________ E-Mail Address: ___________________________________________

Are you a parent of a current HCPS student? Yes    No If yes, Name of School: _____________________________________

Do you represent an Organization? Yes    No Name of Organization: ______________________________________

Material Information

Title of Material:______________________________________________________________________________________________

Source of Material:______________________________________________________________________________________________

Author or Producer/Publisher of Material:__________________________________________________________________________

School Site of Material: _____________________________ Specific Location of Material:_________________________________

This completed form constitutes the complainant’s proffered evidence and documentary basis for reconsideration of the Material. After reading (or viewing if video) the material in its entirety, please answer each question as fully as possible so that your views may be adequately understood by the reviewing committee. Please attach additional pages if necessary.

1. What was the date and outcome of the conversation with the site’s Principal, Media Specialist or Teacher?

___________________________________________________________________________________________________________

___________________________________________________________________________________________________________

___________________________________________________________________________________________________________

2. What brought the Material to your attention (reviews, lists, word of mouth, etc.)?

___________________________________________________________________________________________________________

___________________________________________________________________________________________________________

___________________________________________________________________________________________________________

___________________________________________________________________________________________________________

___________________________________________________________________________________________________________
3. Have you read the material in its entirety. Circle one: Yes  No

4. Please state any specific objections with the Material:

___________________________________________________________________________________________________________
___________________________________________________________________________________________________________
___________________________________________________________________________________________________________

5. Please provide any specific quote(s) to any specific objectionable portions/passages and give page numbers:

___________________________________________________________________________________________________________
___________________________________________________________________________________________________________
___________________________________________________________________________________________________________

6. Please describe your familiarity with the author:

___________________________________________________________________________________________________________
___________________________________________________________________________________________________________
___________________________________________________________________________________________________________

7. Please describe your understanding of any professional reviews of the Material:

___________________________________________________________________________________________________________
___________________________________________________________________________________________________________
___________________________________________________________________________________________________________

8. Please describe your understanding of the theme or purpose of the Material:

___________________________________________________________________________________________________________
___________________________________________________________________________________________________________
___________________________________________________________________________________________________________

9. Please describe the age group you would recommend the Material be made available (if any):

___________________________________________________________________________________________________________
___________________________________________________________________________________________________________
___________________________________________________________________________________________________________
10. Please describe any alternative materials you would recommend as a substitute for the Material:

___________________________________________________________________________________________________________
___________________________________________________________________________________________________________
___________________________________________________________________________________________________________
___________________________________________________________________________________________________________

I hereby certify that I have reviewed the material in its entirety, that the information provided above is accurate to the best of my ability, and that I am either a parent or resident of Hillsborough County, Florida.

Signature of Objecting Party: __________________________________________

Date Submitted: _____________________________________________________

Please submit the completed form, any attachments, and any questions to HCPSObjectionForm@hcps.net

If you have any questions or comments, the School District Point of Contact for this objection is:

Arlene Castelli, Administrator on Special Assignment
901 E. Kennedy Blvd
Tampa, FL 33602
HCPSObjectionForm@hcps.net

The public records law of Florida provides that any records made or received by any public agency in the course of its official business are available for inspection, unless specifically exempted by the Legislature. Please be aware that this form is subject to the public records law of Florida.