

**REQUEST TO PROHIBIT A STUDENT FROM CHECKING OUT SPECIFIC LIBRARY MATERIALS**

Request to prohibit a student from checking out certain library materials to be submitted to the superintendent. Please complete one form per student.

REQUEST INITIATED BY \_\_\_\_\_ DATE \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_

Name .....

Address .....

City/State \_\_\_\_\_ Zip Code \_\_\_\_\_ Telephone \_\_\_\_\_

Name of affected Student .....

Requester's Relationship to Student (must be parent/legal guardian) \_\_\_\_\_

**BOOK OR OTHER PRINTED MATERIAL TO PROHIBIT STUDENT FROM CHECKING OUT:**

Author \_\_\_\_\_ Hardcover \_\_\_\_\_ Paperback \_\_\_\_ Other \_\_\_\_\_

Title \_\_\_\_\_

Publisher (if known) \_\_\_\_\_

Date of Publication \_\_\_\_\_

**MULTIMEDIA MATERIAL TO PROHIBIT STUDENT FROM CHECKING OUT:**

Title \_\_\_\_\_

Producer (if known) \_\_\_\_\_

Type of material (filmstrip, motion picture, etc.) \_\_\_\_\_

\_\_\_\_\_  
Dated

\_\_\_\_\_  
Signature

**Adopted:** 12/12/2022

**Reviewed:**

**Revised:**