

Alternative Curricular Assignment Request Form

The primary purpose of the Alternative Curricular Assignment Procedure is to secure, at the earliest level possible, equitable solutions to justifiable claims.

If a parent/guardian seeks an alternative assignment, the request must be received as early as possible in the course and prior to the time when his or her student will begin the assignment.

Parent or Guardian Name: _____

Address: _____ Telephone No.: _____

City: _____ State: _____ Zip: _____

Email: _____

Age: _____ Grade: _____ Subject: _____

Student for Whom Alternative Assignment is Being Sought: _____

School: _____

Please describe type of material (e.g., book, journal, media, etc.) at issue:

Title: _____

Author: _____

Publisher or Producer: _____ Copyright & Edition: _____

Have you discussed your concerns with the classroom teacher? () Yes () No

If a rationale exists for this work, have you had an opportunity to review it? () Yes () No

If you have not discussed your concerns formally with the classroom teacher, please call or email to make an appointment with the teacher and discuss your concerns.

If you have discussed this matter with the classroom teacher and still wish to initiate a formal request for an alternative assignment for your child please answer the following questions after you have read, viewed, or listened to the questioned material in its entirety. If sufficient space is not provided, attach additional sheets. (Please sign your name to each additional attachment.)

Have you read or viewed the material in its entirety? () Yes () No

1. To what in the material do you object? (Please be specific.)

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2. What do you believe is the theme or purpose of this material?

3. Is there anything valuable in this material? Please comment.

4. Have you read any reviews of this material? If yes, please provide the names and/or source of the review.

Parent/Guardian PRINTED Name: _____

Signature of Parent/Guardian *Date*

Please return completed form to the Principal.

Received by Principal: _____
Signature *Date*

Action Taken/Date (To be completed by the building principal or District Literacy and Curriculum Administrator.)