Illini West HSD 307 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.	
Subject area	Classroom teacher
Please state, as precisely as possible, the specific cut to which the user objects (<i>include name</i> , <i>title</i> , <i>autho</i>	
How did you become aware of the curriculum area, by classroom observation by revie by word-of-mouth other	
To what in the curriculum area, instructional materi	al, or program do you object? Be specific.
Do you want your child excluded from participation	n? Yes No
In place of participation in the curriculum area, v your child?	vhat course of study would you recommend for
Complainant name (please print)	Telephone
	nt/guardian of student
Complainant address	
Signature of complainant	Date
DATED: October 10, 2007	

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