

Request to Show Video or DVD

Teacher: _____ Subject: _____

Class Period(s): _____ Video/DVD Title: _____

Date(s) to be Shown: _____

How much of the video /DVD do you plan to show to the class?

Entire: _____ Length: _____ Partial: _____ Length: _____

Rating: _____ (see guidelines regarding required permission forms.
All R-rated movies require parental permission. This includes those in school
collections.)

How will video/DVD be used in class?

Explain (in detail) how this is linked to the North Carolina Standard Course of Study
(include specific goals/objectives):

Other Information:

Approval of Principal: _____ / _____
Signature Date

Conditions: _____
