

**MANTECA UNIFIED  
SCHOOL DISTRICT**

**FILM/VIDEO/CD/DVD/ VIEWING APPROVAL FORM**

(Submit 10 days prior to showing the film/video)

Date \_\_\_\_\_ School \_\_\_\_\_

Teacher \_\_\_\_\_ Class/Grade \_\_\_\_\_

Period to be shown: 1 2 3 4 5 6 (Circle periods) or time (K-6) \_\_\_\_\_

Title of film/video/TV Program: \_\_\_\_\_

Rating: \_\_\_\_\_

Provide a brief summary of the film/video/CD/DVD/TV program and how it relates to the curriculum course of study.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are there any concerns as to the appropriateness of the film/video/CD/DVD/TV program, i.e., language, violence, and subject matter?

\_\_\_\_\_  
\_\_\_\_\_

Where was the film/video/CD/DVD/TV program obtained? \_\_\_\_\_

\_\_\_\_\_

Date of teacher preview \_\_\_\_\_ Proposed date of viewing \_\_\_\_\_

Teacher's Signature

Date

Approved: Yes \_\_\_\_\_ No \_\_\_\_\_

Department Chair's Signature (high school)

Administrator's Signature

Attach parent permission form to be sent out if needed.

Date Adopted: April 3, 2001