



410 Roy Drive • Ashville, AL 35953
(205) 594-7131 (205) 594-4441 Fax

Justin D. Burns
Board President

Scott Suttle Superintendent

SCCS Parent Curriculum Access Request Form

School Name: _____

Student's Name: _____

Student's Grade Level: _____

Parent/Guardian Name: _____

Parent/Guardian Email: _____

Parent/Guardian Phone Number: _____

Request Details

Date of Request: _____

Specific Curriculum Requested:

Please specify the subject(s) and class(es) for which you are requesting access to the curriculum:

● Subject: _____

● Teacher's Name: _____

● Class Period/Section: _____

Type of Materials Requested:

Please check all that apply:

- Instructional Materials (textbooks, workbooks)
- Supplemental Materials (handouts, articles)
- Other: _____

Nickie VanPelt

Allison Gray

Cathy W. Fine

Bill Morris
At-Large

Randy Thompson
Ashville/Steele District
Odenville District

DeWayne Lovell
Ragland District
Springville District

V.P / At-
Large



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Acknowledgment

I understand that this request will be processed in accordance with the Curriculum Transparency Act SB484, and I will be notified of the availability and access details for the requested materials. I acknowledge that my request may be subject to the school's policies and procedures regarding curriculum access.

Parent/Guardian Signature: _____

Date: _____



School Office Use Only

Date Received: _____

Processed By: _____

Response Date: _____

Access Provided:

- Yes
- No

If No, Reason: _____

Comments: _____

Please submit this completed form to the school office. For any questions or further assistance, contact your local school.

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