

POST FALLS SCHOOL DISTRICT NO. 273

Procedure Title: General

Section Title: Guidelines for Viewing Films in the Classroom

Sub Section No. 508.8a

Page 1 of 1

All films, videos and television viewing during instructional time will relate directly to educational curriculum. All films and videos must be previewed in their entirety by the teacher.

Films, video tapes or television shows rated by the Motion Picture Association of America:

G = may be shown at all levels

PG = may be shown at all levels but must be pre-approved at the elementary level (grades k-6) with a Sensitive Material Parent Permission form

PG-13 = may not be shown at the elementary level (grades k-6); may be shown at the secondary level (7-12) but must be pre-approved for students in grades 7 and 8 with a Sensitive Material Parent Permission form

R = may not be shown to grades k-8; may only be shown at the secondary level (9-12) but must be edited for educational use and be pre-approved with a Sensitive Material Parent Permission form

NC-17 = cannot be shown at any time in the schools

Non-instructional viewing time includes:

- inclement weather activity (recess);
- pre or post school activity; or
- extra curricular activity

Film ratings are based on the film's level of violence, language, sexual frankness and adult subject matter. The rating assigned to a video tape or film should be a guide as to whether student viewing is appropriate. If a teacher is uncertain about its appropriateness, he/she will confer with the building administrator. All federal copyright guidelines must be observed.

Adopted: 2/12/96

Reviewed: 2017, 2021, 2024, 2025

POST FALLS SCHOOL DISTRICT NO. 273

Procedure Title: General

Section Title: Sensitive Material Parent Permission Form

SubSection No. 508.8b

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**POST FALLS SCHOOL DISTRICT
SENSITIVE MATERIAL PARENT PERMISSION**

Name of Teacher: _____ Date(s) of Presentation: _____

Subject: _____

Period(s)/Grade(s) involved: _____

Title and Type of Material: _____

Topic of Material: _____

Method of Presentation: _____

Educational Objective(s): _____

Reason for Sensitive Rating: _____

Alternate Method of Instruction: _____

Please initial the appropriate line and return by: _____

_____ I give my son/daughter permission to participate in the material chosen for this curricular area.

_____ I **DO NOT** give my son/daughter permission to participate in the material chosen for this curricular area.

Student Name _____

Parent/Guardian Name (print) _____

Parent/Guardian Signature _____ Date _____

Students will be permitted to participate in activities that contain sensitive material only if the Sensitive Material Parent Permission form has been received by the instructor prior to the beginning of the activity.

Adopted: 2/12/96

Reviewed: 2017, 2021, 2024, 2025

POST FALLS SCHOOL DISTRICT NO. 273

Procedure Title: General

Section Title: Review of Instructional Materials Request Form

SubSection No. 508.8c

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REQUEST FOR REVIEW OF INSTRUCTIONAL MATERIALS

Please discuss this matter with the teacher and building administrator before you submit this form.

Parent / Guardian Name: _____

Telephone _____ Address _____

School / Grade Concerned _____

Author _____

Title _____

Type of Material _____

Publisher _____ Copyright Date _____

Did you read (hear, see) the entire work? _____

Do you have a child in the school in question? _____

Are you aware of the teacher's purpose in using this work? _____

What prompted you to object to this work? _____

To what in the book or material(s) do you object? Please be specific, cite pages, etc. _____

What do you feel might be the result of exposure to this material? _____

For what age group would you recommend this material? _____

Are you aware of judgments of critical experts regarding this material? _____

If so, which critics? _____

Have you read a review of this work? _____ If so, what is the source of the review? _____

In its place, what material of equal literary or information quality would you recommend that would address the same theme? _____

What would you like the Review Committee to do about this material?

- A. _____ Do not assign it to my child.
- B. _____ Withdraw it from all students as well as from my child.
- C. _____ Review its educational value.
- D. _____ Other

Name of parent / guardian (print) _____

Parent / Guardian Signature _____ Date _____

This form, when completed, should be submitted to the building principal. The review committee will make its decision within thirty (30) days of the receipt of this form. You will be notified of the meeting date(s) of the review committee where you will have the opportunity to express your views. You will be notified in writing of the review committee's decision. Appeal of this decision may be made through the principal and the superintendent to the Board of Trustees. Material subject to this review process will not be removed until the final decision has been reached.

Date Supervisor Received Complaint _____

Supervisor's Signature _____

Please attach additional comments or documentation (page numbers, timestamps, etc.) to this request as needed.

Adopted: 2/12/96

Amended: 8/12/24

Reviewed: 2010, 2021, 2024, 2025

REQUEST FOR REVIEW OF MEDIA MATERIALS

Please discuss this matter with the librarian and building administrator before you submit this form.

Idaho code 18-1514 provides the following definition in regard to obscene materials. Please read and review these definitions prior to completing this form.

Definitions:

1. "Adolescent minor" means any person thirteen (13) years of age or older but less than eighteen (18) years of age.
2. "Minor" means any person less than eighteen (18) years of age.
3. "Nudity" means the showing of the human male or female genitals, pubic area or buttocks with less than a full opaque covering, or the showing of the female breast with less than a full opaque covering of any portion thereof below the top of the nipple, or the depiction of covered male genitals in a discernibly turgid state.
4. "Sexual conduct" means any act of masturbation, homosexuality, sexual intercourse, or physical contact with a person's clothed or unclothed genitals, pubic area, buttocks, or, if such person be a female, the breast. Breastfeeding, childbearing, medical procedures and examinations, and any other nonerotic physical contact shall not be considered sexual conduct.
5. "Sexual excitement" means the condition of human male or female genitals when in a state of sexual stimulation or arousal.
6. "Sado-masochistic abuse" means flagellation or torture by or upon a person who is nude or clad in undergarments, a mask or bizarre costume, or the condition of being fettered, bound or otherwise physically restrained on the part of one who is nude or so clothed.
7. "Harmful to minors" means the quality of any material when it:
 - a. Taken as a whole, appeals to the prurient interest of adolescent minors as judged by the average person, applying contemporary community standards; and
 - b. Depicts or describes representations or descriptions of nudity, sexual conduct, sexual excitement, or sado-masochistic abuse which are patently offensive to prevailing standards in the adult community with respect to what is suitable material for adolescent minors and includes, but is not limited to, patently offensive representations or descriptions of:
 - i. Intimate sexual acts, normal or perverted, actual or simulated; or
 - ii. Masturbation, excretory functions or lewd exhibition of the genitals or genital area.
8. "Material" means anything tangible, whether derived through the medium of reading, observation, or sound, including any picture, photograph, drawing, sculpture, motion picture, film, or similar visual representation or image or any book, pamphlet, magazine, printed matter however reproduced, or sound recording.
9. "Sexually explicit" means the quality of any material when it contains erotic depictions of nudity, depicts sexual conduct or sado-masochistic abuse, or contains any explicit and detailed description or narrative account of sexual excitement, sexual conduct, or sado-masochistic abuse. "Sexually explicit" shall not include diagrams about anatomy for scientific education, religious books such as the Bible and the Torah, or content relating to classical works of art.

Request initiated by: _____

Parent / Guardian Name: _____

Telephone: _____ Address: _____

School/Grade Concerned: _____

Author: _____

Title: _____

Type of Material: _____

Publisher: _____ Copyright Date: _____

Have you read Post Falls School District #273 Board Policy 508.8? Yes ____ No ____

Have you read the definitions on this form pertaining to I.C. § 18-1514? Yes ____ No ____

Have you read, listened or viewed the entire material? Yes ____ No ____

Do you believe the material is “harmful to minors” as defined in I.C. § 18-1514? Yes ____ No ____

If yes, please check all that apply. **Specific page numbers or timestamps must be included.**

- Nudity _____
- Sexual Conduct _____
- Sexual Excitement _____
- Sado-masochistic abuse _____

If no, please describe what objections you have to the material, citing page numbers or timestamps. Include whether or not you feel the material is objectionable for all readers/listeners/viewers or a particular age group.

What would you like the Review Committee to do about this material?

- A. ____ Place it in the Parent Permission Collection of the school’s Library/Media Center
- B. ____ Remove it entirely from the school’s Library/Media Center
- C. ____ Review its educational value
- D. ____ Other: _____

Name of parent/guardian (print): _____

Parent/guardian signature: _____ Date: _____

This form, when completed, should be submitted to the building principal or his/her designee. The review committee will make its decision within thirty (30) days of the receipt of this form. You will be notified of the meeting date(s) of the review committee where you will have the opportunity to express your views. You will be notified in writing of the review committee’s decision. Appeal of this decision may be made through the principal or his/her designee and the superintendent to the Board of Trustees. Material subject to this review process will not be removed until the final decision has been reached.

Date Supervisor Received Complaint _____

Supervisor’s Signature _____

Please attach additional comments or documentation (page numbers, timestamps, etc.) to this request as needed.

Adopted: 8/12/24

Revised: 7/13/26

Reviewed: 2017, 2021, 2024, 2025, 2026

POST FALLS SCHOOL DISTRICT NO. 273

Procedure Title: General

Section Title: Rationale for Use of Instructional Material Form

SubSection No. 508.8e

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RATIONALE FOR USE OF INSTRUCTIONAL MATERIAL

Teacher/librarian will complete this form upon notification that a Request for Review of Instructional Materials has been filed.

School/Grade: _____

Teacher/Librarian: _____

Course or Class: _____

Type of Material: _____

Title: _____

Approximate date(s) book or material was used: _____

This material was: (check all that apply)

_____ Studied by the whole class

_____ Recommended to individual students

_____ Checked out from the school library

Context of use:

Ways in which the material was appropriate for students in this class:

Ways in which the material was integral to the objectives of this course unit:

Printed material used in conjunction with this lesson/unit is attached.

Signature

Date

Use the back of this form to include any other information that you feel might be helpful or if additional space is needed to answer the questions more fully.

Adopted: 2/12/96

Reviewed: 2017, 2021, 2024, 2025

REVIEW COMMITTEE DECISION

This form is to be filled out by the Review Committee. Please attach a copy of the Request for Review of Educational Materials, the Sensitive Material Parent Permission form, if used, and the Rationale for Use of Instructional Material.

Material subject to objection: _____

Please state each objection to the material and your findings: _____

Attach additional information.

Committee Members:

- | | |
|----------|----------|
| 1. _____ | 2. _____ |
| 3. _____ | 4. _____ |
| 5. _____ | |

Parent/Guardian/Teacher/Librarian: I have been informed of the Review Committee's decision.

_____ Parent/Guardian Signature	_____ Date
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_____ Teacher Signature	_____ Date
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_____ Librarian Signature	_____ Date
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Return this form to the building administrator within ten (10) days of receipt.
If you wish to appeal this decision, please notify the building administrator in writing within ten (10) days of receipt of the review decision.

Adopted: 2/12/96
Reviewed: 2017, 2021, 2024, 2025