

CLINT INDEPENDENT SCHOOL DISTRICT

VIDEO REQUEST FORM

This form must be completed by the teacher and approved by the Principal/Asst. Principal prior to the use of video material. It applies to the use of video/DVD materials in all instructional, extra-curricular, or district sponsored/approved activities. This also applies when the video DVD is from home or school.

Teacher's Name \_\_\_\_\_ Subject \_\_\_\_\_ Room \_\_\_\_\_ Date to be shown \_\_\_\_\_

Name of Video/DVD \_\_\_\_\_ Length of Video/DVD \_\_\_\_\_

Video/DVD (check one) \_\_\_\_\_ Rented \_\_\_\_\_ Teacher Owed \_\_\_\_\_ School Owed \_\_\_\_\_ Student Owed \_\_\_\_\_

Recorded from \_\_\_\_\_ (Network/Cable Channels) \_\_\_\_\_ Date recorded rating \_\_\_\_\_

Note: Only "G" rated movies/videos may be shown in pre-school through 5. Movies/videos in middle and high schools rated "PG" 13 or above require parental permission for each student.

TEKS(s) addressed:

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

Lesson Objectives (s):

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

Relation of Video/DVD to TEKS(s) & lesson objectives: -----

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

Prior Activities: \_\_\_\_\_

Follow-up Activities: \_\_\_\_\_

Does this video/DVD contain any controversial subject Matter? \_\_\_\_\_ If so, please explain: \_\_\_\_\_

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

What provision for meaningful alternate activity will be provided for the student whose parents do not wish their child to view this material?

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

I have seen this video/DVD in its entirety and accept responsibility for use of this video if questioned. (Covers non-rated)

Teacher's signature: \_\_\_\_\_

Approved \_\_\_\_\_ Disapproved \_\_\_\_\_

Administrator's Signature \_\_\_\_\_ Date \_\_\_\_\_