



# Duplin County Schools

## Parent Permission To View Video

Dear Parent/Guardian:

I plan to use the videos/DVD(s) listed below as a resource in my class for the instructional objective listed below. Because of this video's rating, your written permission is required for your child to view the video in class. Please review the information below and if you choose to give permission for your child to view the video in class, sign and return the form to me by \_\_\_\_\_.

\*Note: If you decide not to allow your child to view this video, I will provide other appropriate learning activities for your child.

(Please Print)

Today's Date ____/____/____	<b>School:</b> _____			
COURSE INFORMATION				
Teacher:	Subject:	Grade:	Date(s) to Show:	Period(s):
Common Core or Essential Standard Objective:				

VIDEO INFORMATION				
Source: _____ (Rental, Media Center, Department, Own, Home Recording, on-line)	Home Recording Information:			
	Date Recorded: ____/____/____	Network: _____		
Title:	Format:	Length:	Length to be shown:	Rated:
Teacher's Signature: _____	<input type="checkbox"/> Approval Granted  <input type="checkbox"/> Approval Denied		Parent's Signature: _____	