**PHS VIDEO APPROVAL FORM**

All films/videos/DVDs that are shown to our students MUST be rated “G” or “PG” and MUST relate to our curriculum. Teachers must have previously watched the video before it is shown to students.

Teacher Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Classroom Subject \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title of Video \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Rating on Video \_\_\_\_\_\_\_\_ Date to be Shown \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Video acquired from: \_\_\_school library \_\_\_student \_\_\_store \_\_\_other

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COS Objectives Addressed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How will this video supplement your instructional objective?

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Have you previewed this entire video? \_\_\_\_\_YES \_\_\_\_\_NO

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Teacher Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Principal Signature

\_\_\_\_\_Request Approved \_\_\_\_\_Request Denied

***\*\*\*This form must be approved and returned to teacher before video is allowed to be shown.***