

**VIDEO VIEWING PERMISSION FORM**

**SCHOOL DISTRICT OF \_\_\_\_\_**

**PARENT/GUARDIAN NOTIFICATION FORM**

**Date:** \_\_\_\_\_

**Dear Parent/Guardian:**

**I am planning to show \_\_\_\_\_ to  
my \_\_\_\_\_ grade \_\_\_\_\_ class. This film/video is rated  
\_\_\_\_\_. The rating is due to these factors: \_\_\_\_\_**

**The purpose of seeing this film/video is to: \_\_\_\_\_**

**\_\_\_\_\_ The film/video will be shown in its entirety  
\_\_\_\_\_ Only the following portions of the film/video will be shown: \_\_\_\_\_**

**If you wish to preview the film/video, it may be borrowed or rented from: \_\_\_\_\_**

\_\_\_\_\_  
**Signature of Teacher**

**If you want your child to view this film/video, please sign below and return this  
form with your child or mail it to the address indicated. Please return this form on  
or before: \_\_\_\_\_.**

**(If a form is not returned by the indicated date, we will presume permission has not  
been granted and the child will not view the film/video.)**

**Film/Video:** \_\_\_\_\_

**Student Name:** \_\_\_\_\_

**Signature Parent/Guardian:** \_\_\_\_\_

**School:** \_\_\_\_\_ **School Address:** \_\_\_\_\_