OMAHA PUBLIC SCHOOL  
Department of Curriculum and Learning  
REQUEST TO USE NON-APPROVED VIDEOCASSETTES, FILMS, OR OTHER MEDIA IN THE CLASSROOM

Teachers planning to use instructional media such as videocassettes and films, which have not been previously approved by staff from the Department of Curriculum and Learning must complete this form. Please discuss instructional aspects of your request with your principal and refer to the following documents:

**Policies and Regulations of the Douglas County School District No. 001**  
Policy 3.21 a and b  
Policy 6.22

**Practices and procedures, Douglas County School District No. 001**  
Utilization of textbooks, #4, Page 28  
Use of Non-Print Media From Outside Sources, Page 61  
Responsibility for Selection of Media, Page 62

Building principals should forward a copy of all requests to the appropriate Director listed below:  
Director of Elementary Education  
Director of Special Education  
Director of Secondary Education

Name of Teacher ___________________________ School ___________________________

Title of Media ____________________________

Type and Description of Media ____________________________

To Be Used in Which Course/Subject ____________________________ Grade Level _______

Length of Media ____________________________ Date(s) To Be Used ____________________________

Portion or number of minutes being used ____________________________

Reason for Use (Linkage between program and curriculum):

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

Where was media acquired? __________________________________________________________

Before students view this media, is parent permission suggested? _____ Yes _____ No

Has Media Been Previewed by Teacher? _____ Yes _____ No

______________________________________________________________________________

Principal or Designee ____________________________ Date ____________________________

Department of Curriculum and Learning  

Approved __________

Comments ____________________________________________

______________________________________________________________________________

______________________________________________________________________________

White Copy — Teacher Copy  
Canary Copy — Principal Copy  
Pink Copy — Director Copy  

Item No. 1382412  

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