Book Approval Rationale Form

1. Name of Textbook______________________________________________________________
   Author______________________Publisher____________________Copyright date______

2. Your name and school__________________________________________________________

3. For what class will this book be used? ___________________________________________

4. Have you personally read the entire book and reviewed all parts of it? ________

5. Please give a short summary of this book: _______________________________________
   __________________________________________________________________________
   __________________________________________________________________________
   __________________________________________________________________________

6. Why did you choose this book? ________________________________________________

7. How does this book relate to interests and abilities of your students? __________
   __________________________________________________________________________
   __________________________________________________________________________
   __________________________________________________________________________

8. Does this publication include materials that are generally recognized as controversial? Yes _____ No _____

   If so, please explain: __________________________________________________________
   __________________________________________________________________________
   __________________________________________________________________________
   __________________________________________________________________________

OVER
9. If this book is a supplementary book:

A. How does this book fit into your curriculum?

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________

B. At what point in the year will it be introduced? (following what unit, along with what other readings)

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____________________________________________________________________

C. What alternate selections (already on NMUSD approved list) could students read if parents were to request another book?

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10. Other Comments:

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__________________________________________  ______________________
Signature                                      Date

Please return to Thomas R. Antal, Director at S.I.M.C.

10/06