

## REQUEST FOR PRIOR APPROVAL: Assigning Supplemental Texts in Secondary Classrooms

WCPSS believes that students should read from a variety of texts and encourages strong instructional decisions at the school level. Texts other than those from the district reading lists must have prior approval from the principal or designee before assigning. WCPSS defines assigned reading as any text used by the student or by the teacher in a whole class, a group within the class, a literature circle, and/or an assigned summer reading experience.

| Teacher(s):                              |                             | Date of Request:   |                             |
|--|-----------------------------|--|-----------------------------|
| Title of Text:                           |                             | Author:  |                             |
| Course/Grade:                            |                             | 9-12 Course Level:   |                             |
| Learning Objective(s) tan                | ight through this text and  | d correlated to NCSCOS or so   | chool-based curriculum:     |
| Rationale for choosing the               | is text to teach the learni | ng objective(s):   |                             |
| Instructional <b>Delivery</b> (cir       | cle one):                   |  |                             |
| Whole class                              | Literature circle           | Summer Reading   | Other                       |
| <b>Potential Challenges</b>              | Identify the ch             | allenge and discuss how you  | would address this concern. |
| Objectionable language                   |                             |  |                             |
| Sexuality                                |                             | _  |                             |
| Violence                                 |                             |  |                             |
| Cultural/Ethnic                          |                             |  |                             |
| Other                                    |                             |  |                             |
| 2. Parent permission                     |                             | or principal review.  Yes (Attach copy)  opriate to the classroom instru | ctional program.            |
|  |                             |  |                             |
| Teacher's Signature (requesting teacher) |                             | Teacher's Signature (colla   | aborating teacher)          |
| Prior Approval Granted                   |                             |  | Prior Approval Denied       |

Date

Principal or Designee's Signature