

Frederick County Public Schools

INSTRUCTION

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SUPPLEMENTAL MATERIAL RECOMMENDATION

Material Name: _____ Author: _____

Publisher: _____ Publishing/Copyright Date: _____

Media: Book _____ Video Tape _____ Other (Specify) _____

Courses (including levels) in which the material will be used: _____

Instructional objectives to be addressed through the use of this material:

How the material will be used with students: _____

Noteworthy qualities of this material that contribute to its recommendation for instructional use: _____

Possible concerns, limitations, or issues related to the use of this material as recommended: _____

Signatures of Recommending Teachers:

Teacher

Date

Teacher

Date

Teacher

Date

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FOR OFFICE USE ONLY

Approved: _____ Not Approved: _____

Conditions (if appropriate): _____

School: _____ Principal's Signature: _____ Date: _____

Adopted: July 3, 2018