

# PETERS TOWNSHIP SCHOOL DISTRICT

## PETERS TOWNSHIP HIGH SCHOOL

PRINCIPAL: MRS. LORI PAVLIK • ASST. PRINCIPALS: MR. CHRISTIAN LESNETT AND MRS. APRIL RAGLAND

Click to enter date permission slip is sent home

Dear Parents and Guardians:

On Click to enter date/dates is shown, Click to enter Class Name , will watch clips from the movie, Click to enter list the clips and name of movie, which is rated-R. , Click to enter name of movie, which is rated-R. The purpose of viewing this film is Click to enter educational purpose.

According to the Motion Picture Association of America, this movie is rated-R because of Click to enter reason for rating using [www.filmratings.com](http://www.filmratings.com). If you would like further information on this film, please review it at Click to enter hyperlink from [www.common sense media.org](http://www.common sense media.org) for this film. In an effort to eliminate questionable content, Click to enter ClearPlay or TV Guardian will be used as well.

Please sign the form below indicating whether your child may view or may not view this movie. Alternative lessons will be provided to students who may not view this movie. Only students who have a signed permission form will be permitted to view this movie. Please also be aware that District Policy 105.2 – Exemption from Instruction ensures that parents/guardians may excuse their child from specific instruction that conflicts with their religious beliefs.

If you have any questions or concerns, please email me at Click to enter your email address.

Sincerely,

Click to enter Teacher's Name

Approved:

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Please return this permission form by Click to enter date.

I, \_\_\_\_\_, give/do not give **[circle one]** my permission for  
(Parent/Guardian Name)

\_\_\_\_\_ to watch the movie listed on this form.  
(Student's Name)

If I **do not** give my permission for my child to watch the movie, I would like to:

\_\_\_\_\_ excuse my child from this instruction because of my religious beliefs per Policy 105.2.

\_\_\_\_\_ request an alternate assignment for my child.

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)