MESA PUBLIC SCHOOLS

Video Use Request
(For Videos Not Rated G or Equivalent)

Teacher Name ___________________________________ Grade/Department _________________

Video Title ___________________________________ Date of Request _____________________

Date(s) of Viewing: ____________________________ Video Run Time ____________________

1. Content Appropriate?  Yes ☐  No ☐

The video is rated _____ and a signed parent permission form will be required for each student who views the video.

2. Use Appropriate?  Yes ☐  No ☐

The video viewing will qualify as a: _____ Educational Use  _____ Reward or Entertainment Use

3. Use Legal?  Yes ☐  No ☐

If the video is for educational use, the teacher agrees that (i) the video will be shown only to enrolled students in the classroom, (ii) the video’s content corresponds directly to the course curriculum, and (iii) the teacher will provide direct instruction to students that connects the video to the curriculum before or after the viewing.

If the video is for reward or entertainment use, the school has a current Public Performance License from Movie Licensing USA, and the video is distributed by any of the following companies:


Approved by Principal:  Yes ☐  No ☐

________________________  __________________________
Signature of Principal or Designee  Date

IIBE-R-F (Effective 02/23/16)