

Granite Falls School District
Instructional Materials Committee
Basic Instructional Materials /Approval Form

Subject area : _____ Date: _____

Title: _____

Author(s): _____

Copyright date: _____ Publisher: _____

Grade Level: _____ Requested by: _____

Classification of Materials:

_____ **Basic Instructional Materials**

_____ **Trial-Use/Pilot Materials** (has been piloted, requesting approval for adoption)

New material? _____ Yes _____ No Cost: _____

This material has been reviewed by the following committee(s) in accordance with the District's Policy(s) Number 6080:

_____ **Curriculum Adoption Committee** Yes. Date _____
Committee Chair Signature _____

AND/OR

_____ **Leadership Team** Yes. Date _____
Principal Signature _____

***** **District IMC** *****

Recommendation of district Instructional Materials Committee (IMC):

_____ Grant Approval _____ Deny Approval (Attach reasons)

District IMC Chair Signature _____ Date: _____

***** **Board Action** *****

The district IMC recommends the formal adoption of the above material(s) to the Granite Falls School District Board. The Board of Directors decision:

_____ Adoption Approved _____ Adoption Denied

Board of Director Signature _____ Date: _____