Dear Parents/Guardians,

Your son or daughter is currently enrolled in my English class. To instruct my classes I try to use various approaches to convey the true meaning of history to my students. With the assistance of technology and film, the events of history are more than just learned they are experienced and felt by students.

We will be watching documentaries, testimonies, and films. Some of these films include but not limited to: *Schindler’s list, The Boy in the Striped Pyjamas, The Devil’s Arithmetic, The Outsiders, I Am Sam, or Lorenzo’s Oil.* These films give students a first-hand perspective of the historical event we will discuss in class. These films will enhance the meaning behind one of the books we will be reading: *I Will Plant You a Lilac Tree* by Laura Hillman, *The Devil’s Arithmetic* by Jane Yolen, *The Boy in the Striped Pyjamas* by John Boyne, *Night* by Elie Wiesel, *The Absolutely True Diary of a Part-Time Indian* by Sherman Alexie, or *The Outsiders* by S.E. Hinton. Some of these films are rated “R” or “NR” and as a result I’m asking your permission to allow your son/daughter to watch ***ALL*** films in class.

Due to the graphic nature of some of these films, I am requesting my students obtain a signed permission slip to view the movie. If you feel these films are not appropriate for your son or daughter, he/she will go to another room during viewing and will have an alternative assignment to do related to the book. This permission slip must be turned in by\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. Thank you.

If you have any questions, comments, or concerns feel free to contact me at:

Kimberly Sanchez

Room: 14B

\_\_\_\_\_\_\_\_\_ Yes, I give permission for my son/daughter to watch movies in English class.

\_\_\_\_\_\_\_\_\_ No, I do not give permission for my son/daughter to watch movies. Please remove them from class during viewing.

Student's Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_