

West Point Consolidated School District

TECHNOLOGY

MOVIE STREAMING SERVICE REQUEST FORM

Please complete the following information to request a new application. All requests **MUST** be approved by your principal.

Note: Key all responses to the questions below. The answer boxes will adjust as you type. Once finished, print, sign/date, and have principal sign. Scan form and email to an IT staff member.

| | |
|--------------------|--------------|
| Teacher Name: | Date: |
| Email Address: | School: |
| Subject(s) Taught: | Grade Level: |

1. Which Movie Streaming Service are you requesting to open? (Netflix, Hulu, Disney Plus, etc.)

2. What is the primary purpose of the movie/video?

3. What are the learning goals? How does this movie/video relate to your framework/curriculum?

4. Are there other videos on YouTube that can be viewed for the same purpose? If so, why should we open this streaming service?

5. What are dates for watching the movie/video?

6. What is the rating of the movie?

7. By this request, the movie/video follows all CIPA policies. I accept full responsibility for student viewing and will face disciplinary action up to termination.

8. I acknowledge that the district does not support nor approve any abuse of privacy or use of term policies.

Print Name:

Signature:

Date:

Principal's Signature: