



**WESTERN PLACER
UNIFIED SCHOOL DISTRICT**

Date: _____

Dear Parents:

In accordance with Western Placer Unified School District Policy 6144.2.1, we are notifying you of our intention to show a PG rated film in the following class:

Film title: _____

Rating: _____ Date to be shown: _____

Synopsis of film: _____

Parents or guardians are invited to view the film on _____

at _____ in _____

(Parent viewing must be scheduled one week prior to class viewing.)

If you wish your child to view the film, please sign the permission slip and return it to school. Students who do not return signed permission slips **will not be allowed to view the film.**

-----X-----X-----X-----X-----X-----X-----X-----

DETACH AND RETURN THIS PORTION TO SCHOOL

My son/daughter _____ has my permission

to view the film _____ on

Parent/Guardian Signature

Date