

# EXHIBIT 5

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| <b>Office of Curriculum and Instructional Programs—Evaluation and Selection Unit</b><br><b>MONTGOMERY COUNTY PUBLIC SCHOOLS</b><br>Rockville, Maryland 20850   | <b>RECORD OF EVALUATION FOR INSTRUCTIONAL MATERIALS</b>   |
| <b>INSTRUCTIONS: Please PRINT or TYPE on this form.</b>  |   |
| *School or Office Name _____ *School # (if applicable) _____<br>*Requester Name and Position _____<br>*Full Title of Material _____<br>*Author/Editor/Producer/Compiler _____<br>*Publisher _____ *Copyright _____<br>Vendor _____ Catalog # _____ Catalog Date _____<br>Series Title _____<br>*ISBN _____ *Cost _____<br>*Grade Level(s): PK K 1 2 3 4 5 6 7 8 9 10 11 12 College Level Prof.   | <b>COMMENTS: Provide the following information to describe how the materials are essential to student learning:</b><br>1.*Direct support of content standards and performance indicators<br><br>2. *Authenticity of the material<br><br>3. *Impact on instructional time<br><br>4. *Clarity or ease of understanding<br><br>5. *Provide information about content, strengths/weaknesses, areas of concern (restrictions) and cultural relevance (culture, religion, ethnicity, region, country, author, characters, gender) |
| *Subject(s) _____<br>*Course Name (Secondary schools only) _____<br>Reading Level (if known) _____<br>*Media type<br><input type="checkbox"/> Textbook, Workbook, Test Preparation (five signatures by teaching professionals, content supervisor signature required, 30-day shelf for community review)<br><input type="checkbox"/> Instructional or Library Materials (two signatures by teaching professionals required)<br><input type="checkbox"/> Software/Purchased web content (two signatures by teaching professionals required)<br><input type="checkbox"/> Requested testing for compatibility by <b>Field Installation</b><br>Date Approved by <b>Field Installation:</b> ____/____/____<br><input type="checkbox"/> Instructional film <input type="checkbox"/> Captioning Available<br><input type="checkbox"/> Languages other than English available If so, which ones? _____<br>MPAA Age Rating (choose one): <input type="checkbox"/> G <input type="checkbox"/> PG <input type="checkbox"/> PG13 <input type="checkbox"/> R <input type="checkbox"/> NC-17<br>Attach waiver request (Form 365-21) or film waiver (content supervisors only) for instructional film outside MPAA age rating<br><input type="checkbox"/> Not Rated (e.g., films produced before the MPAA rating system or non-commercial films, which are not covered by MPAA) | Please check where appropriate:<br><input type="checkbox"/> Contents <input type="checkbox"/> Glossary <input type="checkbox"/> Bibliography <input type="checkbox"/> Index <input type="checkbox"/> Illustrations<br><input type="checkbox"/> Maps <input type="checkbox"/> Charts <input type="checkbox"/> Timeline <input type="checkbox"/> Web references   |
| <b>Appropriate Audience</b><br><input type="checkbox"/> Accelerated and Enriched <input type="checkbox"/> Learning Disability <input type="checkbox"/> Deaf/Hard of Hearing<br><input type="checkbox"/> Physical Disability <input type="checkbox"/> ESOL (English for Speakers of Other Languages) <input type="checkbox"/> Read Aloud<br><input type="checkbox"/> High Interest, Lower Vocabulary <input type="checkbox"/> Visually Impaired   | For films and textbooks only, content supervisors, print or type:<br>First and Last Name _____<br>Position _____<br>Signature _____<br>Date ____/____/____  |
| *For recommendations—Check One<br><input type="checkbox"/> Highly Recommended <input type="checkbox"/> Recommended <input type="checkbox"/> Disapproved<br>*Please print or type your name, your position, and provide a signature:<br>1. _____<br>2. _____<br>3. _____<br>4. _____<br>5. _____<br>Date ____/____/____   |   |
| *Required fields <span style="float: right;">MCPS Form 365-25, Rev. 11/11</span>   |   |

**Instructions for Completing Revised MCPS Form 365-25**  
*All fields with an asterisk (\*) must completed unless exceptions are noted.*

| Field Name  | Directions for completion   |
|---|---|
| *School or Office Name  | Enter school or office name.  |
| *School # (if applicable)   | Enter school number, if requestor is school staff member. Central service requestors may leave this blank.  |
| *Requester Name and Position  | Enter first and last names and position title of person requesting the material be evaluated.   |
| *Full Title of Material   | Enter complete title. Complete information for a book is located on the title page. For non-print materials, this information is either on the packaging or the media itself.   |
| *Author/Editor/Producer/Compiler  | Enter complete names. Complete information for a book is located on the title page. For non-print materials, this information is either on the packaging or the media itself.   |
| *Publisher  | Enter the publisher's name (generally applies to books). Usually complete information is on the title page. It also can be located on the back of the book's title page.  |
| *Copyright  | Enter the copyright date located on the back of a book's title page. The copyright date on non-print materials is not in a standard location. It is often on the back of the packaging.   |
| Vendor  | The vendor is the supplier. If it is different from the publisher and if the information is available, enter the vendor name.   |
| Series Title  | Enter the series name, if known (generally applies to books). The most complete information is on the title page.   |
| *ISBN   | Enter the ISBN number, which is located on the back of a book's title page and is often on the packaging of non-print materials or on the media.  |
| * Cost  | This information is located in catalogs, on the material or on the websites of online ordering companies (e.g., Amazon or Barnes and Noble).  |
| *Grade Level(s): PK K 1 2 3 4 5 6 7 8 9 10 11 12<br>College Level Prof.   | Enter the specific grade level or a range of grade levels of intended use.  |
| *Subject(s)   | Enter the content areas appropriate to intended use.  |
| *Course Name (Secondary schools only)   | Enter the exact course name in which this material will be used.  |
| Reading Level (if applicable)   | Enter the reading level, if known, and applicable to the media type.  |
| *Media type   | Enter the delivery method that applies to this material (e.g., book, DVD, CD-ROM, Playaway, Blu-Ray, MP3).  |
| <input type="checkbox"/> Textbook, Workbook, Test Preparation<br>(Five signatures by teaching professionals, content supervisor signature required, 30-day shelf for community review)  | <b>If requesting approval for a textbook, check the box, This is the last field to complete.</b> After completion, send a copy of Form 365-25 with the material to the appropriate content supervisor. Textbooks include traditional textbooks, workbooks, test preparation materials, core books/anchor texts. These can be in print or non-print forms (as expressed in "Media Type"). If the title is approved by the content supervisor, MCPS Form 365-25 and the material is sent to Evaluation and Selection to sit on the 30-day shelf for community review before it is available for purchase. |
| <input type="checkbox"/> Instructional or Library Materials<br>(Two signatures by teaching professionals required)  | <b>If you seek approval as an instructional material (for all teaching staff) or library material (only media specialists), check this box.</b> Two reviewers/evaluators are required for approval, and both are required to sign the form before submitting to Evaluation and Selection.   |
| <input type="checkbox"/> Software/Purchased web content<br>(Two signatures by teaching professionals required)<br><input type="checkbox"/> Requested testing for compatibility by Field Installation<br>Date Approved by Field Installation: ____/____/____ | <b>If you seek approval for software or web content that must be purchased, check this box.</b> Before submitting this form, contact Field Installation staff for testing. Confirm that you have contacted Field Installation by checking "Requested testing for compatibility by Field Installation" and by entering the "Date Approved by Field Installation." This is the date you received permission from Field Installation to use this product.  |

| Field Name  | Directions for completion   |
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| <input type="checkbox"/> <b>Instructional Film</b> <input type="checkbox"/> <b>Captioning Available</b><br><input type="checkbox"/> Languages other than English available. If so, which ones?  | If you seek approval for instructional film, check this box. Also, check whether captioning is available. Include information about languages other than English, if applicable.  |
| <b>MPAA Age Rating (choose one):</b><br><input type="checkbox"/> G <input type="checkbox"/> PG <input type="checkbox"/> PG13 <input type="checkbox"/> R <input type="checkbox"/> NC-17<br>Attach waiver request (Form 365-21) or film waiver (content supervisors only) for instructional film outside MPAA rating age)<br><input type="checkbox"/> Not Rated (e.g., films produced before the MPAA rating system or non-commercial films, which are not covered by MPAA) | For information concerning the MCPS procedures for MPAA rated films, contact the appropriate content supervisor or the Evaluation and Selection of Instructional Materials unit.  |
| <b>Appropriate Audience:</b><br><input type="checkbox"/> Accelerated and Enriched Inst.<br><input type="checkbox"/> Learning Disability<br><input type="checkbox"/> Deaf/Hard of Hearing<br><input type="checkbox"/> ESOL (Eng. for Speakers of Other Languages)<br><input type="checkbox"/> High Interest, Lower Vocabulary<br><input type="checkbox"/> Physical Disability<br><input type="checkbox"/> Read Aloud<br><input type="checkbox"/> Visually Impaired         | Check all that apply.   |
| *For recommendations—Check One<br><input type="checkbox"/> Highly recommended <input type="checkbox"/> Recommended <input type="checkbox"/> Disapproved   | • Choose the appropriate recommendation.  |
| <b>Signatures:</b><br>*Please print or type your name, your position, and provide a signature:  | <ul style="list-style-type: none"> <li>• If you are requesting textbook evaluation, do not sign, but send the form to the content supervisor for committee review. See directions under Media Type above.</li> <li>• If you are evaluating instructional materials, library materials, software or purchased web content, only two professional teaching staff signatures are required.</li> <li>• Please make sure to print (or type) your name and your position.</li> </ul>  |
| *Direct support of content standards and performance indicators   | Describe the intended use of this material along with applicable and specific standards, indicators, unifying questions for the content area(s) and/or courses.   |
| *Authenticity of the material   | Is the author/editor/producer/compiler qualified to publish this title? Are the situations realistic? Can the facts be verified?  |
| *Impact on instructional time   | How much time do you expect the use of this title to take (could be minutes, a day, or total minutes or any combination)? Is using this title a productive use of class time and in what way?   |
| *Clarity/ease of understanding  | Is the material accessible to the population you want to reach? Is the language appropriate for the intended audience? Is difficult or challenging content handled appropriately for the intended audience?   |
| *Provide information about<br><ul style="list-style-type: none"> <li>• Content</li> <li>• Strengths/weaknesses</li> <li>• Areas of concern (restrictions)</li> <li>• Cultural relevance (culture, religion, ethnicity, region, country, author, characters, gender)</li> </ul>  | <ul style="list-style-type: none"> <li>• Content—brief summary of the material</li> <li>• Strengths/Weaknesses—What is especially good about this resource? Why would you spend money on this resource? What are drawbacks to this resource? What is missing that you would like to see in a resource on this topic?</li> <li>• Areas of Concern—Do you predict any restrictions to its use? Any content that doesn't quite "hit the mark?"</li> <li>• Cultural relevance—as appropriate, please provide information</li> </ul> |

| Field Name   | Directions for completion  |
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| <p>Please check where appropriate:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Contents</li> <li><input type="checkbox"/> Glossary</li> <li><input type="checkbox"/> Bibliography</li> <li><input type="checkbox"/> Index</li> <li><input type="checkbox"/> Illustrations</li> <li><input type="checkbox"/> Maps</li> <li><input type="checkbox"/> Charts</li> <li><input type="checkbox"/> Timeline</li> <li><input type="checkbox"/> Web references</li> </ul> | <p>Check all that apply to this resource.</p>  |
| <p>For films and textbooks only, content supervisors print or type first and last name:</p> <p>_____</p> <p>Position: _____</p> <p>Signature: _____</p> <p>Date ____/____/____</p>   | <p>Content supervisors (only) print or type name and position, Sign when approving a textbook or film outside the MPAA age rating.</p> |