



EVALUATION REPORT FOR ELECTRONIC LEARNING RESOURCES

(Please complete both sides of this form. Submit to Office of Curriculum, Instruction & Professional Development.)

TITLE _____ PUBLISHER _____

Check One: Textbook Ancillary Stand Alone Material

COPYRIGHT _____ COST _____

Educational Content

	Good	Avg	Poor	N/A
Standards/Course Content Alignment				
Accuracy/Completeness				
Relevance/Usefulness of Visuals				
Appropriate Readability				
Appropriate Content Challenge				
Differentiation				
Multiple Ways to Check Understanding				

Social Content – Complies with EC/SBE Policies

	Yes	No
Male/Female Roles EC 50501, 60040(a), 60044(a)		
Ethnic/Cultural Groups EC 50501, 60040(b), 60044(a)		
Sexual Orient/Gender Identity EC 50501, 60040(b), 60044(a)		
Older Persons and the Aging Process SBE policy, 1979		
People w/ Disabilities EC 50501, 60040(b), 60044(a)		
Entrepreneur and Labor EC 60040(c), 60044(a)		
Religion EC 50501, 60044(a) and Subsection (b)		
Ecology and the Environment EC 60041(a)		
Dangerous Substances EC 60041(b)		
Thrift/Fire Prevention/Humane Treatment EC 60042		
Brand Names/Corporate Logos EC 60048, 60200		
Declaration of Indep./U.S. Constitution EC 60043		

QUESTIONABLE REFERENCES (sex, drugs, obscenities, etc.)

Pages: _____

Recommendation for Adoption or Purchase:

- A first priority (basic/core textbook/instructional materials– district funding)
- B second priority (other supplemental materials - site funding)
- C not recommended for purchase / no objection for use (site funding)
- D not recommended for purchase or use

**PLEASE COMPLETE
REVERSE SIDE**

Rev 10/2016

BRIEF SUMMARY: (Include specific likes, dislikes, student reactions, etc.)

If recommending for adoption, please complete the following:

a) Course: _____ Course Code: _____ Grade Level(s): _____

b) Material is recommended for students whose ability in this course/grade level is: ___ ABOVE ___ AVERAGE ___ BELOW

c) What curricular need will this meet?

d) Check one purchase recommendation:

Basic Textbook: _____ (purchase 1 per student – district funding)

Supplemental Material: _____ (purchase 5 per classroom)
_____ (purchase classroom set)
_____ (other: _____)

Evaluator: _____ School: _____ Date: _____

Rev 10/2016