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| Florida Seal.bmp **STATE OF FLORIDA  SCHOOL READINESS PROGRAM   CURRICULUM EVALUATION RECONSIDERATION**  **FORM OEL-SR-7107** |

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| Publisher/Submitter Name | | Click or tap here to enter text. | | | | | | |
| Mailing Address | | Click or tap here to enter text. | | | | | | |
| Curriculum Name | | Click or tap here to enter text. | | | | | | |
| Edition (If Applicable) | | Click or tap here to enter text. | | | | | | |
| Year | | Click or tap here to enter text. | | | | | | |
| Submitted by | | Click or tap here to enter text. | | | | | | |
| Contact Information | | Click or tap here to enter text. | | | | | | |
| Email | | Click or tap here to enter text. | | | | | | |
| Author (If Applicable) | | Click or tap here to enter text. | | | | Check box if curriculum is proprietary and not available for purchase | | |
| Please identify the appropriate age group for the curriculum submitted. | | | | | | | | |
| 0-8 mos. | 8-18 mos. | | 18-24 mos. | 2 year olds | 3 year olds | | 4 year olds |  |
|  |  | |  |  |  | |  |
| Does the curriculum contain a character development component? | | | | | Yes | | No |  |
| Please identify the nature and basis of the request for reconsideration. When necessary provide page numbers or web links as supporting documentation.  Click or tap here to enter text. | | | | | | | | |

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| **OEL OFFICIAL USE ONLY** | Date request received: |  |  |
| Date request reviewed: |  |
| Reviewed by: |  |
| Request granted ☐  The curriculum may be submitted to OEL for evaluation. | | | |
| Request Denied ☐ | | | |