

\_\_\_\_\_  
Student Name

\_\_\_\_\_  
Page # on AP list \_\_\_\_\_  
Book Title

\_\_\_\_\_  
Author

**Parents and Guardians:**

Your student will be completing an outside reading project on a book chosen from the AP Reading List. He/she will be writing & acting out a screenplay using a scene(s) from the book. Students may choose to read the book independently, or they can read a book with a partner or group of no more than 4 people. If your child chooses to work with a partner or group, a shared grade will be given on the end of the book project. Some books may have mature content. Please discuss your child's choice of book with them. It is required, therefore, that you give permission for your student to read the novel. Please do so by signing below and returning by Tuesday, March 30<sup>th</sup> (Day 1) & Wednesday, March 31<sup>st</sup> (Day 2). Final projects will be due Wednesday, May 12<sup>th</sup> (Day 1) & Thursday, May 13<sup>th</sup> (Day 2). If you have any concerns about the book they have selected please feel free to contact your student's teacher or our Media Specialist.

Thank you for your support!

I give permission for my son/ daughter to read and analyze the above listed book as their Outside Reading Project book for Quarter 4 – Due Wednesday, May 12<sup>th</sup> (Day 1) & Thursday, May 13<sup>th</sup> (Day 2).

\_\_\_\_\_ I will be reading and working alone.

\_\_\_\_\_ I will be reading and working with a partner: \_\_\_\_\_  
(Partner's's Name)

\_\_\_\_\_ I will be reading and working in a group with: \_\_\_\_\_  
(Partner # 1 Name)  
\_\_\_\_\_  
(Partner # 2 Name)  
\_\_\_\_\_  
(Partner # 3 Name)

\_\_\_\_\_  
Student Name

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Guardian Name

\_\_\_\_\_  
Guardian Signature