JORDAN SCHOOL DISTRICT
Drama Production Form

School: __________________________ _

Drama Teacher: ________________________ _

Play: __________________________ _

Playwright/Author/Publisher: ______________ ___ _

Dates to be performed: ____________________ _

Time: ______ Location: ________ Admission Cost: ___ _

Play has been reviewed by the Local Drama Production Selection Committee and has
been given authorization to produce.

Local Committee:

• Drama Teacher
• Administrator
• Additional teacher (music teacher for musicals, English teacher for plays)
• Four (4) parent representatives (one of these selected by the local School
  Community Council)

☐ Play is on the approved play list. ☐ Play is NOT on the approved play list.

_____________________________    __________________
Drama Teacher Signature            Date

_____________________________    __________________
Principal Signature                Date

Note: This form must be submitted to the Drama Consultant in the Curriculum
Department two (2) months before production.