

NON-PRINT EVALUATION

■ **PREVIEW ORDER NO.** _____ Purchase Cost \$ _____

Title of Production _____

Distributor _____ Media Format _____

■ **NAME(S) OF EVALUATOR(S)** _____ Phone _____

Department/Program _____

Brief Description of Content _____

(Use back of page if more room is needed.)

■ CHECK where applicable:	Excellent	Good	Fair	Poor	N/A
1. Currentness of content	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Accuracy of content	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Appropriateness of content for intended use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Technical aspects (sound, visuals)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Accompanying printed material (notes, guides, manuals)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Men and women are portrayed in a positive, inclusive manner and in both traditional and non-traditional roles of leadership and support.			YES	NO	N/A
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Dialogue is gender-inclusive (positive, equal, non-stereotypical)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. People of minority racial and ethnic groups are portrayed in a positive, inclusive manner and in a variety of leadership and support roles.			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. People with disabilities are portrayed in a positive, inclusive manner and in a variety of leadership and support roles.			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

■ **COMMENTS** _____

■ **RECOMMENDATION: It would be useful for:** (check where applicable)

Learning skills or technique
 Introducing a topic
 Summarizing a topic
 Identifying working tools/equipment

Stimulating a discussion
 Group showing
 Individual study
 Other _____

Indicate various classes/subjects where the material will be used _____

Approximate number of students viewing material per school year _____

■ **DO YOU RECOMMEND PURCHASE OF MATERIAL?**
 YES
 NO
 If YES, signature of chair is required.

Chair's Signature _____ Date _____

Are department funds available to assist in the purchase of AV material?
 Yes
 No

Department Code or Contract No. (if applicable) _____ Expiry Date _____