

Browns Valley School District 801
App Request Form

Teacher: _____ Grade Level: _____

Name of App Requested: _____

Tie to district curriculum: _____

Instructional Objective: _____

Briefly describe the basic function of this app: _____

Instructional time/frequency of app use (ex. 3 times per week for 15 minutes): _____

Other information: _____

How will students use this app?

- Individually
- Small Group
- Whole Class

What is the purpose of this app?

- Remediation
- Enrichment
- Differentiation
- Other, please explain:

Cost of App (each): _____ Number of Apps requested: _____

Machine(s) on which they will be installed: _____