

**Princeville Jr. Sr. High School Library & Media Center**

302 Cordis Av. - Room 574, Princeville, IL 61559

(309) 385-4660 x1574, fax (309) 385-1110 ksullivan@princeville326.org

**Mrs. Kathy Sullivan Mrs. Dana Willi (Wed.)**

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Dear Parents,

The school library in Princeville Junior Senior High School has two sections for its fictional books. (Non-fiction works are not divided by age level.)

The main fiction section contains books that have an interest and reading age level for students of age 10 and up (have a “j” on the spine label) and from age 12 and up (have a “J” on the spine label).

There is also a separate “High School Fiction” section. These books have a “Y” (Young Adult) on their spine label and target students of age 14 and up. It’s possible that some H.S. level books contain material beyond your child’s reading comfort or maturity level. Because this is 6th graders’ first year in the Jr. Sr. High School, we steer them towards the main fiction area.

However, you know your child best and so can best determine what is appropriate for their interests. If you wish for your child to have access to the H.S. fiction in addition to the main fiction section, please complete and return the below permission slip to your child’s homeroom teacher. Thank you.

Yours in Education,

Mrs. Kathy Sullivan

Princeville Junior Senior High School

ksullivan@princeville326.org

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**6th grade Library Permission Form**

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

Homeroom Teacher: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

My child, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, has my permission to check-out **ALL** fictional materials (both from the main area and H.S., marked with a “Y”) from the Princeville Junior Senior High School Library and Media Center.

Parent Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 H.R. teacher initials: \_\_\_\_\_\_\_\_\_