**AP United States History: Supplemental Reading Permission Form**

***Parents/guardians:*** While each selection on this list is recommended by the text, the National Library Association, or independent journal reviews for the college prep curriculum, you may find some reading materials more appropriate than others for certain students. Please examine your child’s choice carefully before signing the following permission form. If you have any questions, please contact me at EBA, 554-4479 or at **kreeves@ burke.net or kreeves@burkeacademy.org.**

*I have read the above requirements and* ***given my approval for*** *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to read the following:* **(Student’s Name)**

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 **(Selected Reading: Title and Author)**

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