

**Ministry of Education Curriculum Development/Revision
Internal Review**

Cover Page for Draft Document and Sign-Off

Name of Draft Document _____

Subject Area _____

Grade Level _____

Return the draft curriculum document together with summary comments to: (curriculum document development or revision coordinator & contact info)

Note to Reviewers: Please write comments/suggestions directly on the draft document and flag pages to facilitate follow-up by curriculum staff. Please also provide a brief summary of your review response in the space provided below.

Reviewing Division/Branch/Unit _____

Review Perspective _____

Comments or Suggestions for Improvements – Summary

Manager/Director Signature

_____ **Date** _____

Ministry Executive Signature

_____ **Date** _____