SMART CONSORTIUM

Member District Curriculum Profile, 2006-2007

School District: _____

Curriculum Director/Consultant: _____

Address: _____

Telephone: _____

E-Mail: _____

Date Completed: _____

MATHEMATICS:

Grade Level(s)	Name of Series/Textbook	Publisher; Date Adopted	Date of Next Curriculum Review Cycle

SCIENCE:

Grade Level(s)	Name of Series/Textbook	Publisher; Date Adopted	Date of Next Curriculum Review Cycle