



State of Florida Instructional Materials Adoption
“Principles of Individual Freedom Assurance for Publishers”
(Form IM19)

By signing below, _____, on behalf of _____,
Insert name and title Insert company name
assures that the instructional materials submitted for review to be state adopted for the
_____ are consistent with the principles of individual freedom described
Insert adoption cycle year and subject
in section 1003.42(3), F.S., and that I am authorized to make this assurance on behalf of

Insert company name

Signature

Name (Please print)

Date