

SAMPLE

The Protection of Pupil Rights Amendment (PPRA), 20 U.S.C. § 1232h, requires Soda Springs School District No. 150 to notify you and obtain consent or allow you to opt your child out of participating in certain school activities. These activities include student surveys, analysis, or evaluation (“protected information surveys”); the collection, disclosure, or use of student information for marketing purposes (“marketing surveys”); and certain physical exams and screenings.

Following is a schedule of activities requiring parental notice and consent or opt-out for the upcoming school year. This list is not exhaustive and, for surveys and activities scheduled after the school year starts, the district will provide parents, within a reasonable period of time prior to the administration of the surveys and activities, notification of the surveys and activities and be provided an opportunity to opt their child out, as well as an opportunity to review the surveys.

Date:

Grades: Five (5) and Six (6)

Activity: ABC Survey of At-Risk Behaviors.

Summary: This is an anonymous survey that asks students questions about behaviors such as drug and alcohol use, sexual conduct, violence, and other at-risk behaviors. The survey also asks questions of a demographic nature concerning family make-up, the relationship between parents and children, and use of alcohol and drugs at home.

Consent [for ED funded, protected information surveys only]: A parent must sign and return the attached consent form no later than ***[return date]*** so that your child may participate in this survey.

Opt-out [for any non-ED funded protected information survey]: Contact ***[school official]*** at the address listed below no later than ***[date]*** if you do not want your child to participate in this activity.

Date:

Grades: One (1) through Six (6)

Activity: Flu Shots

Summary: The County Department of Public Health Services will administer flu shots for influenza types A and B.

Opt-out: Contact ***[school official]*** at the address listed below no later than ***[date]*** if you do not want your child to participate in this activity.

[Survey: Limited to personal information designated as “directory information”]

Soda Springs, ID 83276

Phone: (208) ____ - ____

Fax: (208) ____ - ____

E-mail: _____