

## PARENT CONSENT FORM

August 20-22, 2008

Dear Parents of Fourth through Twelfth Graders:

Lexington County School District One occasionally asks students to complete tests, surveys and questionnaires so that we can gather information about various topics pertaining to our youth. During this school year, we will administer two student surveys:

- 1. The first survey will be an anonymous student survey about bullying. We will administer this survey to all students in Grades 4–12 the week of November 10, 2008. The purpose of this survey is to gather information about students' perceptions regarding bullying behaviors in our schools. The information we gather will help the district design a comprehensive approach toward addressing student concerns.
- 2. The second survey will be an anonymous student survey designed to help us gather information about students' attitudes toward alcohol and drugs, the availability of alcohol and drugs in the community, and other community/school-related issues. This survey will be administered to all students in Grades 8–11 either Dec. 2 or 3, 2008. The data we collect from this survey will allow us to monitor our current prevention programs in the schools and also apply for additional funding for similar programs.

Your agreement and your student's participation in the surveys are completely voluntary. Your student may decide not to participate. Or, if your student does participate, he or she can choose not to answer any question that makes him or her uncomfortable, without penalty.

**Confidentiality:** The surveys are <u>confidential</u> (not seen by others) and <u>anonymous</u> (students' responses cannot be matched to students). Students do not provide their names anywhere on the survey.

**Benefits of the Surveys:** The surveys will help program planners learn more about how to design activities to improve school and community programs to help prevent bullying and alcohol and drug use among our youth. Your student will not have to answer any questions unless he or she wants to, and his or her answers to these questions will not be seen by anyone but the staff working on the survey results.

**Survey Review:** Parents can preview copies of the surveys after Monday, September 1, 2008, by contacting Georgia Mason, director of guidance, at 803-821-1052.

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Please ( ) ( ) ( ) ( ) ( )	I give my consent for my student to take both I give my consent for my student to take both I give my consent for my student to take the b I give my consent for my student to take the al I do not give my consent for my student to par	ullying survey. cohol/drug survey.
Please <b>sign</b> and have your child <b>return</b> this form to his/her school by Monday, Sept. 15, 2008.		
	<u> </u>	J, s.P. s.
5	Signature of Parent/Guardian	Date
5	Student's Name (please print)	