

WRITTEN CONSENT FOR STUDENT SUBMISSION TO A SURVEY,  
PERSONAL ANALYSIS, OR EVALUATION

NAME OF STUDENT \_\_\_\_\_

ADDRESS \_\_\_\_\_

GRADE/SCHOOL YEAR \_\_\_\_\_

BIRTHDATE OF STUDENT \_\_\_\_\_

PARENT'S NAME \_\_\_\_\_

PARENT'S ADDRESS \_\_\_\_\_

The enclosed  Survey  Personal Analysis  Evaluation, not directly related to academic instruction, contains questions in the following areas:

- the student's or parents' political affiliation(s)
- mental or psychological problems potentially embarrassing to the student or his/her family
- sex behavior or attitudes
- illegal, anti-social, self-incriminating, or demeaning behavior
- critical appraisals of other individuals with whom respondents have close, family relationships
- legally-recognized privileged and analogous relationships, such as those with lawyers, physicians, and ministers
- income (except as required by law to determine eligibility for participation in a program or for receiving financial assistance under such a program)

I consent       I do not consent

to the participation of my child.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date