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