

Below is an example of what a parent opt-in form may look like. It is intended to provide an example and is not a required format.

Student Survey Opt-In Form

Dear Parent or Guardian.

[SCHOOL NAME] has been selected by the Colorado Department of Education to receive a [INSERT DOLLAR AMOUNT] grant to prevent bullying and educate students and families about our efforts. This exciting opportunity means that [SCHOOL] will receive monetary support to purchase an evidence-based bullying prevention program, hire a coach to help implement the program, and educate students and parents about bullying.

As part of this opportunity, students will be given the chance to complete a brief survey about their experiences at school. The questions on the survey relate to peer relationships, how safe students feel at school, and the quality of student-teacher relationships. **All questions are voluntary**.

No personally identifiable information will be collected. All data will be compiled to provide averages. This means that no answers provided by a specific student will be able to be accessed.

<u>Risks</u> There is minimal risk in participating in the survey; however, some students may feel uncomfortable answering questions about peer and teacher relationships. To minimize this discomfort, the survey is completely anonymous and all questions are voluntary.

Benefits Participation in the survey will help inform a more effective bullying prevention program and thus improve the safety, social and emotional skills, and wellbeing for all students. For example, students may report that teasing happens most frequently in a certain area of the school. Staff can use that information to provide additional monitors in those areas.

For more information about the survey that [SCHOOL] will be using, you can visit the website for the survey at: [SURVEY WEBSITE]

If you agree to allow your child(ren) to complete the survey, please complete the information below and return this sheet to the main office.

Thank you for your cooperation.

Student(s) Name(s)	
Parent/Guardian Name	
☐ (Check) I give my permission to allow my child(ren) to participate in the student impression survey.	
Parent/Guardian Signature	Date