

CONSENT/OPT-OUT NOTIFICATION FORM

(This form is effective for the current school year only)

PPRA affords parents and students age eighteen (18) or older (“eligible students”) certain rights regarding this school district’s conduct of surveys, collection, and use of information for marketing purposes, and certain physical exams. These include the right to:

- **Consent** before students are required to submit to a survey that concerns one or more of the following protected areas (“protected information survey”) if the survey is funded in whole or in part by a program of the U.S. Department of Education (ED):
 1. Political affiliations or beliefs of the student or student’s parent;
 2. Mental and/or psychological problems of the student or student’s family, or potentially embarrassing to the student or the student’s family;
 3. Sex behavior or attitudes;
 4. Illegal, anti-social, self-incriminating, or demeaning behavior;
 5. Critical appraisals of others with whom respondents have close family relationships;
 6. Legally recognized privileged or analogous relationships, such as those of lawyers, doctors, or ministers;
 7. Religious practices, affiliations, or beliefs of the student or parents; or
 8. Income, other than as required by law to determine program eligibility for participation in a program or for receiving financial assistance under such program.
- Receive notice and an opportunity to opt a student out of:
 1. Any other protected information survey, regardless of funding;
 2. Any non-emergency, invasive physical exam or screening required as a condition of attendance, administered by the school or its agent, and not necessary to protect the immediate health and safety of a student, except for hearing, vision, or scoliosis screenings, or any physical exam or screening permitted or required under State law; (any physical examination or screening that is permitted or required by state law is permitted without parental notification) and
 3. Activities involving collection, disclosure, or use of personal information obtained from students for marketing, or to sell, or otherwise distribute the information to others.
- **Inspect**, upon request and before administration or use:
 1. Protected information surveys of students;
 2. Instruments used to collect personal information from students for any of the above marketing, sales, or other distribution purposes; and
 3. Instructional material used as part of the educational curriculum.

*****NOTE:** The Family Educational Rights Act (FERPA) allows certain Directory Information released to media, colleges, civic or school-related organizations, and state or governmental agencies, as well as published in programs for the athletic, music, and theater presentations of this school district. Please read the district’s FERPA Policy/Procedures for a detailed explanation and parents’ rights to disallow. Directory Information includes, but is not limited to, the following kinds of information: student’s name, address, telephone listing, and electronic mail address; photographs, videos, and electronic images; date and place of birth, grade level, enrollment status, dates of attendance, major field of study; participation in officially recognized activities, sports, and clubs; weight and height of athletes; degrees and awards received; and most recent previous educational institution attended; student ID number, user ID, or other unique personal identifier used by the student for purposes of accessing or communicating in electronic systems, but only if the identifier cannot be used to gain access to education records.. (20 U.S.C. 1232g(a)(5)(A))

(COMPLETE THE INFORMATION ON THE NEXT PAGE AND RETURN THE OPT-OUT/CONSENT FORM TO THE SCHOOL ADMIN OFFICE.)

CONSENT/OPT-OUT NOTIFICATION FORM
(This form is effective for the current school year only)

SCHEDULED ACTIVITY OR EVENT

NAME OF SCHOOL _____ DATE _____

ACTIVITY OR EVENT _____ DATE OF ACTIVITY/EVENT _____

DESCRIPTION OF ACTIVITY/EVENT _____

OPT-OUT

OPT-OUT no later than _____, if you do not want your child to participate.
DATE

ACTIVITY OR EVENT _____ DATE OF ACTIVITY/EVENT _____

PARENT/GUARDIAN SIGNATURE

CONSENT

I, _____, give
PARENT/GUARDIAN

my consent for _____
STUDENT

to participate in _____ on _____
ACTIVITY/EVENT DATE

PARENT/GUARDIAN SIGNATURE

Please return this form no later than _____ so that your child may participate in this activity.
DATE

DATE received by the school administration office: _____
(Retain original in student's permanent record)

DATE counselor notified: _____

DATE principal notified: _____

DATE annotated in PowerSchool: _____