Active Consent

Letter to Parents about Bullying and Harassment

Dear parents,

The (insert name of school's anti-bullying committee) is working within our school to improve bullying and harassment programs. Because our school wants to make sure students can learn in a safe and healthy place, we ask you to participate. Students, parents and teachers in our school will fill out surveys. It is an exciting chance for us to make our school a better place.

Student Surveys

Students at our school will fill out the survey on (insert date). The survey will take about 60 minutes during classroom time. Teachers will be in charge of giving the survey to their class. Your child's name will NOT appear on the survey. All surveys are private and confidential. (insert name of school committee) will provide us with the results of the survey in summary form. Our school will hold an information meeting for parents and teachers, or the school newsletter will publish the results. Before students fill out the survey, they must have a **Consent Form** from a parent or guardian.

If you agree to let your child complete the survey, please check the first box on the Consent Form that comes with this letter, fill in your child's name, and sign at the bottom.

If you decide that you do NOT want your child to complete the survey, check the second box, fill in your child's name and sign at the bottom.

Parent Surveys

I also strongly encourage you to complete the parent survey, even if your child will not be filling out a survey in class. The parent survey will be sent home with the students for parents to complete. Please see my letter attached to the parent survey. Students who return completed parent surveys will be entered in a draw for a prize.

There are no risks for you or your child by participating. Your child's schooling will not be influenced in any way whether or not you choose to participate. I believe the surveys will tell us more about bullying and harassment in our school.

If you have any questions, please contact me or your child's teacher.

Yours sincerely,

Principal

Consent Form for Student Survey

I have read the information letter and I agree to let my child fill out the survey.

I understand that students do not have to complete this survey.

I understand that my child may refuse to complete the survey at any

time. My child may also refuse to answer certain questions and may

decide to stop doing the survey at any time. Teachers and school staff

will NOT see the students' answers to the survey.

□ I allow my child to fill out the survey about bullying and harassment in the school.

(please print your child's name)_____

□ I **do not** allow my child to fill out the survey about bullying and harassment in the school.

(please print your child's name) _____

Please provide your name and signature below:

Name of Parent/Guardian (Please Print) Signature of Parent/Guardian

Date

Return this form to your child's teacher.