Dear Parent or Guardian,

Our school will be administering a social, emotional, and behavioral screener to assess the impact of the COVID-19 pandemic, shift to distance learning, and national events related to systemic racism on student wellbeing. The data that will be collected will include screening results and personal information, such as age, gender, and race/ethnicity. All information will be kept confidential and in accordance with student safeguards defined by the Family Educational Rights and Privacy Act (FERPA). Your permission is required, pursuant to the Protection of Pupil Rights Amendment (PPRA), to begin the screening process. You also have the right to inspect, upon request, the screening instrument and any questionnaires before they are administered or distributed to your child. You may choose to allow your child to be administered a screener or not and may choose to withdraw your permission at any time. For the purpose of administering the social, emotional, and behavioral screener, data collection is defined as [insert data collected, e.g., questionnaires and interviews with your student’s teachers or other educators]. Your agreement to participate or your refusal to participate in the screening and/or data collection will in no way affect the services your student received at [school name].

As part of the social, emotional, and behavioral screening and referral process, your child might be asked to complete questionnaires and interviews by qualified professionals, or the school staff will complete a screener to identify any social, emotional, or behavioral issues. If social, emotional, or behavioral needs are identified, you will be notified by the school. You must give informed written permission before your child may be provided social, emotional, or behavioral services through the school. If necessary, the school will also link you and your student to external behavioral health services in the area.

[Optional language: If your child is involved in the criminal justice system, the court may require us to report to it about his/her participation or progress with consequences if he/she does not follow the court requirement.] If you do not wish for your student to receive social, emotional, and behavioral support services, you have the right to withdraw him/her from the services without penalty, at any time.

**Permission to Participate in Social, Emotional, And Behavioral Screener & Data Collection**

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

By my signature below, I am confirming that I have read the document and have been informed of my rights under PPRA and FERPA.

Please check the appropriate statement, sign and return this form to the school as soon as possible to [staff name/office/department].

❏ I give permission for my child to participate in the universal social, emotional, and behavioral screening process and data collection.

❏ I do not give permission for my child to participate in the universal social, emotional, and behavioral screening process.

❏ I understand that I will be notified and will be required to provide written informed consent prior to any intervention or other social, emotional, and behavioral services are provided for my child.

Signature of Parent(s)/Guardian(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_