

**GEORGIA STUDENT HEALTH SURVEY 2.0 (Grades 6-12)
PASSIVE PARENTAL PERMISSION FORM**

The Georgia Student Health Survey 2.0 is an anonymous, statewide survey instrument that identifies school climate issues that impact student achievement. In order to provide a safe and supportive learning environment for your child, the Georgia Department of Education collects survey information from students during the school year. The survey takes approximately 20 minutes to complete and covers various topics such as school climate and safety, alcohol and drug use and mental health. All student survey data is anonymous and self-reported.

The Protection of Pupil Rights Amendment (PPRA) gives you the right to opt your child out of participating in the survey. If you **do not** wish for your child to participate in the Georgia Student Health Survey 2.0, please sign and return this form to the school by _____. If you would like to examine the survey, please come by the school between _____ and _____, and we will be happy to provide you with a copy for your review.

DO NOT return this form if your child can participate in this survey.

Please sign this form and return it to school by _____
if you **do not** wish for your child to participate.

I would prefer that my child NOT participate in the Georgia Student Health Survey 2.0.

SCHOOL _____

STUDENT _____

GRADE _____

Parent/Guardian Signature

Date

Thank you for your participation.