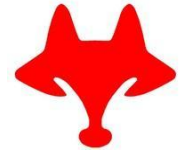




Bedford Central School District
Inspiring and Challenging Our Students



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April 8, 2019

Dear Parent:

The Bedford Central School District is interested in gathering accurate information about alcohol, tobacco and other drug use, as well as related attitudes among our students. To gather this information we will be surveying students in grades 8, 10, and 12 on 5/3/19. Results from this survey will be used to help strengthen our prevention and intervention services in the school and community.

Students will be administered the *Pride Survey for Grades 6-12*. The questions on this survey have been administered to millions of students nationwide.

The survey will be anonymous and will take approximately 30 minutes to administer (during an extended homebase period). Students **do not write their names** on the survey. Your child's and the school's privacy are protected. No names or identifying information are on the survey. No one at the school will ever see the completed survey. The school will receive a report that will summarize survey results by grade level.

Student's participation in the survey is voluntary. Your child does not have to participate and you do not have to provide a reason. Students can answer as many questions as they wish and do not have to answer any questions they do not want to answer. A copy of the survey is available at your child's school for review. You may also contact me at 914-241-6144 for more information.

If you do not want your child to participate in the survey, please return the form below to the main office by Monday, 4/29/19. Your child will then read quietly during the survey period.

Please feel free to contact me with any questions. This survey is an important part of our effort to keep our children healthy and safe. Thank you for your consideration.

Sincerely,

Sue Ostrofsky

Sue Ostrofsky
Principal

Bedford Central School District

Fox Lane Middle School Campus
P.O. Box 298
Mt. Kisco, NY 10549

Pride Survey for Grades 6-12

If you DO NOT want your child to participate, please complete and sign this form:

I do not give my consent for my child(ren) to participate in the Pride Survey for Grades 6-12.

1. _____
(Child's name)

2. _____
(Child's name)

3. _____
(Child's name)

Parent/Guardian Signature: _____

Date: ____ - ____ - 2019

