

## PPRA Model Notice and Consent/Opt-Out for Specific Activities

The Protection of Pupil Rights Amendment (PPRA), 20 U.S.C. § 1232h, requires **Saddle Brook School District** to notify you and obtain consent or allow you to opt your child out of participating in certain school activities. These activities include a student survey, analysis, or evaluation that concerns one or more of the following eight areas (“protected information surveys”):

1. Political affiliations or beliefs of the student or student’s parent;
2. Mental or psychological problems of the student or 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 relationships, such as with lawyers, doctors, or ministers;
7. Religious practices, affiliations, or beliefs of the student or the student’s parent; or
8. Income, other than as required by law to determine program eligibility.

This parental notification requirement and opt-out opportunity also apply to the collection, disclosure or use of personal information collected from students for marketing purposes (“marketing surveys”). Please note that parents are not required by PPRA to be notified about the collection, disclosure, or use of personal information collected from students for the exclusive purpose of developing, evaluating, or providing educational products or services for, or to, students or educational institutions. Additionally, the notice requirement applies to the conduct of certain physical exams and screenings. This includes 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. This does not include hearing, vision, or scoliosis screenings, or any physical exam or screening permitted or required by State law.

Following is a schedule of activities requiring parental notice and consent or opt-out for the upcoming school year. This list is not exhaustive and, for surveys and activities scheduled after the school year starts, the **Saddle Brook School District** will provide parents, within a reasonable period of time prior to the administration of the surveys and activities, notification of the surveys and activities, an opportunity to opt their child out, as well as an opportunity to review the surveys. (Please note that this notice and consent/opt-out transfers from parents to any student who is 18 years old or an emancipated minor under State law.)

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### \*EXAMPLES\*

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*Date:* On or about October 30, 2018  
*Grades:* Eight and Nine  
*Activity:* ABC Survey of At-Risk Behaviors.

*Summary:* This is an anonymous survey that asks students questions about behaviors such as drug and alcohol use, sexual conduct, violence, and other at-risk behaviors. The survey also asks questions of a demographic nature concerning family make-up, the relationship between parents and children, and use of alcohol and drugs at home.

*Consent:* A parent must sign and return the consent below no later than [insert return date] so that your child may participate in this survey.

*Opt-out:* Contact school principal at [**telephone number, email, address, etc.**] no later than [**date**] if you do not want your child to take the ABC Survey of At-Risk Behaviors on or about [**Add date**].

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*Date:* November 19-20, 2018

*Grades:* Nine through Twelve

*Activity:* Student-Based Commercial Services

*Summary:* [**School**] collects and discloses, or allows businesses to collect, use, or disclose personal information collected from students, including names, addresses, telephone listings and Social Security numbers. These businesses provide student-based products and services, such as computer equipment, sports clothing, school jewelry, and entertainment products.

*Consent:* A parent must sign and return the consent below no later than [insert return date] so that your child may participate in this survey.

*Opt-out:* Contact school principal at [**telephone number, email, address, etc.**] no later than [**date**] if you do not want your child to take the ABC Survey of At-Risk Behaviors on or about [**Add date**].

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If you wish to review any survey instrument or instructional material used in connection with any protected information or marketing survey, please submit a request to the school principal. The school principal will notify you of the time and place where you may review these materials. You have the right to review a survey and/or instructional materials before the survey is administered to a student.

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sample opt-out form

I [parent's name] give my consent for [child's name] to take the ABC Survey of At-Risk Behaviors on or about [Add date].

\_\_\_\_\_  
Parent's signature

Please return this form no later than [insert date] to the following school official: [Provide name and mailing address.]