



Haverhill Public Schools

Office of the Superintendent

April 25, 2017

Dear Parents:

Haverhill High School is planning to administer the Youth Risk Behavior Survey to students in grades 9-12 on Thursday, April 27, 2017. This survey was developed by the Centers for Disease Control and Prevention (CDC) and is administered bi-annually by CDC (nationally) and by the Massachusetts Department of Elementary and Secondary Education.

The Department of Education requires towns to engage in local needs assessments to assist with identifying target areas for health education. The information collected by this survey will help educators and public health officials working with the Haverhill Public Schools to improve school health education programs aimed at preventing and reducing health risk behaviors among youth. There are no physical tests or exams involved. **Your child's participation in the survey is completely voluntary and anonymous.** No names will ever be used and the results will be compiled and reported by an independent health education consultant.

This paper and pencil survey is comprised of multiple choice questions, takes 30 to 40 minutes to complete, and will be completed during the school day. The survey will address various areas of risky behavior including safety, violence related behaviors, suicide, use of tobacco, alcohol and drugs, HIV/AIDS education, sexual behavior, dietary behavior, and physical activity. The survey is available for onsite review upon request at the school main office.

If you do not want your child(ren) to participate in this survey, please complete and return the form below to the school principal and they will be exempted from participation. There will be no penalty for students excused from the survey.

If you have any questions, please call Thomas O'Brien, Director of Athletics and Wellness at 978-374-5732.

Sincerely,

Superintendent of Schools

Please excuse my child, _____ from the Youth Risk Behavior Survey that will be administered on Thursday, April 27, 2017.

Parent/Guardian Signature _____ Date _____