

Data Collection/Survey Opt-Out

Dear [INSERT PRINCIPAL'S NAME](#) :

We hope this finds you well. As we are looking forward to getting back to school, there have been official communications from [INSERT SCHOOL NAME AND COUNTY](#) and other conversations within the media, social media and parent groups regarding data collection via assessments and/or surveys of our children. We want to make sure that [INSERT CHILD'S NAME AND STUDENT ID](#) , education is of top priority; as such, there are a few things that we do not feel would be appropriate for [CHILD'S NAME](#) .

This letter is intended to serve as an Opt-Out, as stated in the Student Handbook as necessary, for any assessments or surveys used to collect data on our child.

The Protection of Pupil Rights Amendment (PPRA), 20 U.S.C. §1232h, requires [INSERT SCHOOL NAME](#) to notify parents or guardians to obtain consent for, or to allow parents or guardians to opt their child out of participating in certain school activities. These activities include student surveys, analysis or evaluations that concern one or more of the following eight areas:

1. Political affiliations or beliefs of the student or student's parent(s);
2. Mental health or psychological concerns of the student or the student's family;
3. Sexual 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 parents; or
8. Income, other than as required by law, to determine program eligibility.


This requirement also applies to the collection, disclosure or use of student information for marketing purposes ("marketing surveys") and certain physical exams and screenings.

As we do not feel this is appropriate for educational purposes, we kindly ask that [INSERT CHILD'S NAME](#) be excused from any and all activities listed above as well as to be contacted by the school if these types of conversations may take place in class.

Kindly distribute the attached letter to all appropriate educators and please include this letter in [INSERT CHILD'S NAME](#) school file and as part of [INSERT PRONOUN](#) official record.

We appreciate your support in our family decisions.
Respectfully,

[INSERT SIGNATURE](#) [INSERT DATE](#)
First Name Last Name Insert Date

[INSERT PRINTED NAME](#)  [INSERT DATE](#)
First Name Last Name