

ANNUAL SCHEDULE OF ACTIVITIES AND CONSENT/OPT-OUT FORMS

The Protection of Pupil Rights Amendment (PPRA) requires the school district to notify you and obtain consent and/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, known as “protected information surveys,” that concern one or more of the following eight areas:

- (a) Political affiliations or beliefs of the student or the student’s parents;
- (b) Mental or psychological problems of the student or the student’s family;
- (c) Sex behaviors or attitudes;
- (d) Illegal, anti-social, self-incriminating or demeaning behavior;
- (e) Critical appraisals of others with whom the respondents have close family relationships;
- (f) Legally recognized privileged relationships, such as with lawyers, doctors, or ministers;
- (g) Religious practices, affiliations, or beliefs of the students or parents; or
- (h) 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, known as “marketing surveys,” and/or certain physical exams and screenings.

The following is a schedule of activities requiring parental notice and consent or opt-out for the upcoming school year. This list is not necessarily exhaustive and, for surveys and/or activities scheduled after the school year starts, the school district will provide parents, within a reasonable period of time prior to the administration of the surveys and/or activities, notification of the surveys and/or activities and the opportunity to consent and/or opt their child out, as well as an opportunity to review the surveys.

The right to consent, and notification and opt-out transfers from parents to any student over eighteen (18) years of age or any student who is an emancipated minor pursuant to Iowa law.

Schedule of Activities

[Activity 1 (Requiring Consent)]

[Activity 2 (Permitting Opt-Out)]

Date: [COMPLETE]
Grades
Activity:
Summary:

Date: [COMPLETE]
Grades:
Activity:
Summary:

Consent: A parent must sign and return to the superintendent at Interstate 35 Community School District, the form below no later than _____ so that your child may participate in this activity.

I, _____, give my consent for _____ to take participate in the above referenced activity.

Parent’s Signature: _____ Date: _____

Opt-Out: A parent wishing to opt his/her child out of this activity must contact the superintendent at _____, telephone number: _____, no later than _____ and indicate that you do not wish for your child to participate in this activity.

Approved: June 29, 2015