

### Parental Permission Form

Our school is taking part in the Youth Tobacco Prevention Program sponsored by Alabama Department of Public Health. The content of the survey includes questions related to tobacco on: knowledge and attitudes; environmental tobacco smoke; and school curriculum.

Doing this paper and pencil survey will cause little or no risk to your child. The survey has been designed to protect your child's privacy. Students will not put their names on the survey. Also, no school or student will even be mentioned by name in a report of the results. Your child will get no benefit right away from taking part in the survey. The results of this survey will, however, help your child and other children in the future. We would like all selected students to take part in the survey. The survey is voluntary. No action will be taken against the school, you or your child, if your child does not take part.

Please read the section below. **If you do not want your child to take part in the survey, check the box and return the form to the school.**

If your child's teacher or principal cannot answer your questions about the survey, call Elizabeth Loska with the Alabama Department of Public Health at 1-334-206-2918.

Child's Name: \_\_\_\_\_

Grade: \_\_\_\_\_

I have read this form and know what the survey is about.

My child may **not** take part in this survey.

Parent's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Phone: \_\_\_\_\_