MM, DD, YYYY

To whom it may concern,

I/We, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (parent(s)/guardian(s) names) elect to opt-out my/our \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Child(rens) Names and Grade Level) under the Family Educational Rights and Privacy Act (FERPA) and the Protection of Pupil Rights Amendment (PPRA) from any survey or questionnaire at any of the schools of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ school district that requires my/our children to answer questions specifically regarding race gender, gender identification, sexual orientation, national origin, disability, family structure, and/or socio-economic status. We also explicitly do NOT consent to my/our children participating in any federally-funded survey, analysis, or evaluation that will reveal:

\_\_\_\_ the student(s) own or parents political affiliation or beliefs

\_\_\_\_ mental or psychological problems of the student(s) or family members

sex behavior or attitudes

\_\_\_\_ illegal, anti-social, self-incriminating, or demeaning behavior

\_\_\_\_ critical appraisals of their family members, close friends, and legally recognized

privileged relationships such as lawyers, doctors, and ministers

\_\_\_\_ the student(s) or parent(s) and/or guardian(s) religious affiliations or beliefs, or income levels.

\*If a survey is essential to the district's information, please send it to us for inspection, and we will review and complete it.

Best,

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_