	ection 500 Administrative Guidelines 585.1 tudents		
39	RICHFIELD PUBLIC SCH	IOOLS	
40	ADMINISTRATIVE GUIDE	ELINES	
41	STUDENT SURVEYS OPT OU	U T FORM	
42 43			
44	Student Opt-Out For	m	
45 46	If you do NOT WANT your child to participate in the		_survey, please sign
47	this form and return it to the school office by		
48			
49 50	I would prefer that my child NOT participate in the s	urvey:	
51	School Name:		
52 53 54	Student Name:	_ Student Grade:	
55 56	Parent/Guardian Signature:		
57 58 59	Date:		
60 61 62	Do not return this form if your child will be taking the surve	у.	