



Re: Mass Vision Screenings for Grades 1, 3, 5, and 8

Dear Parent or Guardian:

During the first semester of school, Atlanta Public Schools will be conducting mass vision screenings for **ALL** students in grades 1, 3, 5, and 8th.

Vision screenings are quick and simple tests that help identify potential vision problems in children, such as nearsightedness, farsightedness, and other visual impairments.

Nearsightedness (myopia) is when a child can see things up close but has difficulty seeing things that are far away. Farsightedness (hyperopia) is when a child can see things clearly at a distance but has trouble seeing things up close.

Early detection of these issues is important, as untreated vision problems can impact a child's learning and development. Studies show that approximately 1 in 4 school-aged children have vision problems that, if left unaddressed, can affect academic performance and quality of life.

All students in the specified grades will be screened unless you opt out. Please sign this form below if you prefer that your child **not** participate in the vision screening.

Thank you for your cooperation and for helping us ensure the health and success of our students. If you have additional questions, please contact your school nurse or visit the APS Health Services website: <https://www.atlantapublicschools.us/page/193>.

Complete this portion and return to your child's school by _____ if you do not want them to participate in mass vision screenings: _____ (date)

I **do not** give permission for my child _____ to participate in the mass vision screening. _____ (Student's name)

Signature of Parent/Guardian

Date

Phone

Email

Sincerely,