

ARLINGTON CENTRAL SCHOOL DISTRICT

Brendan Lyons, Ed. D., Superintendent of Schools

144 Todd Hill Road •LaGrangeville, NY 12540 Phone 845-486-4460 • Fax 845-486-4457 •Email blyons@acsdny.org

November, 2013

Dear Parent or Guardian:

Over the course of the next several weeks, the Arlington Central School District will conduct an important study concerning the needs, attitudes and behaviors of our students in Grades 8, 10, and 12. The information obtained through a survey is expected to provide guidance as to how to best serve the needs of young people in our district. The administration of the survey is a collaborative effort between the Arlington Central School District and the Council on Addiction Prevention and Education of Dutchess County, Inc. (CAPE). Arlington is one of nine area districts participating in the survey which will provide data for initiatives at the county level.

The survey has been developed in partnership with SUNY New Paltz and the New York State Office on Alcoholism and Substance Abuse Services (NYS OASAS). This survey will provide our school community and county with a wide range of information including how students spend their time, student perceptions of school and community life, and their participation in various risk behaviors. The survey will help students, families, schools, communities, and the county determine how to best guide young people as they grow into healthy, caring and responsible adults.

Additional information:

- . Students will be given one full class period in which to complete the online survey.
- . The surveys are completed anonymously. No one will know how individual students responded to the survey questions.
- The final report will present findings in an aggregate format. Individual student or school data are not reported. Our school staff does not review any of the completed surveys.
- . The survey is not a test that students take for a grade. A student's grades will not be affected if they choose not to participate.
- . Students are told that their participation is voluntary and that they may skip items on the survey if they choose.

Please consider allowing your child to participate in this study. A copy of the survey will be available for your review in the main offices of the participating schools beginning on Wednesday, November 20, 2013.

- . Arlington High School (AHS)
- . Arlington Middle School (AMS)
- . LaGrange Middle School (LMS)
- . Union Vale Middle School (UVMS)

If you do not want your child to participate, you MUST return the form at the bottom of this letter by Monday, November 25, 2013.

All completed forms for 8th, 10th and 12th graders should be returned to the main office. If a form is not returned to the school, your child will be asked to participate in the survey.

If you have any questions, please contact Lynn Rafalik, Assistant Superintendent for Pupil Personnel Services at 845-486-4460.

Thank you.

Sincerely,

Brendan Lyons Ed. D. Superintendent

Please withdraw my child from participation in the Youth Survey.

(Child's Name – Please Print)

(Grade)

AHS AMS LMS UVMS (Please Circle School)

(Parent Signature)

(Date)