



Peekskill City School District
A System Focused on Every Student; Every Day

The Mission of the Peekskill City School District is to educate students in a caring, inspiring environment characterized by a spirit of excellence and high expectations; prepare graduates to meet or exceed standards; graduate students who respect and appreciate cultural diversity; and prepare students to pursue adult lives as contributing citizens of our local and global community.

Ellen Gerace, LCSW
Director of Special Services

Administration Center, 1031 Elm Street @ Peekskill, NY 10566-3499
(914) 737-3300 ext. 1525- FAX: (914) 788-7584
E-mail: egerace@peekskillschools.org

Dear Parents/Guardians:

The Peekskill School District is interested in gathering accurate information about alcohol, tobacco and other drug use, as well as related attitudes among our students. To gather this information we will be partnering with the Peekskill City Youth Bureau to survey students in grades 8, 10, and 12 during the months of May and June 2019. Results from this survey will be used to help strengthen our prevention and intervention services in the school and community.

Students who participate will be administered the Drug Free Communities Support Program Evaluation of Core Measures Survey. The questions on this survey have been administered to more than 13.7 million students, parents, and faculty nationwide.

The survey will be anonymous and will take approximately 15 minutes to administer. Students **do not write their names** on the survey. Your child's and the school's privacy are protected. No names or identifying information are on the survey. No one at the school will ever see the completed survey. The school will receive a report that will summarize survey results by grade level.

Student's participation in the survey is voluntary. Your child does not have to participate and you do not have to provide a reason. Students can answer as many questions as they wish and do not have to answer any question they do not want to answer. A copy of the survey is available at your child's school for review. You may also call Director of Special Services Mrs. Ellen Gerace at (914) 737 - 3300 ext. 1525 for more information.

If you do not want your child to participate in the survey, please return the form below to the main office by Monday, May 20, 2019.

Please feel free to contact me with any questions and thank you for your help. This survey is an important part of our effort to keep our children healthy and safe.

Sincerely,

Ellen Gerace
Director of Special Services

Drug Free Communities Support Program
Evaluation of Core Measures Survey

If you DO NOT want your child to participate, please complete and sign this form:

I do not give my consent for my child(ren) to participate in the Drug Free Communities Support Program Evaluation of Core Measures Survey.

1. _____,
(Child's name)

2. _____,
(Child's name)

3. _____,
(Child's name)

Parent/Guardian Signature: _____

Date: _____ - _____ - 2019