

262 South Finley Ave.  
Basking Ridge  
New Jersey 07920



T. 908.204.3070  
F. 908.204.3075  
health@bernards.org  
www.bernardshealth.org

November 14, 2016

Dear Parents:

The Bernards Township Health Department and William Annin Middle School will be conducting a survey of alcohol and other drug use among students in 6<sup>th</sup> and 8<sup>th</sup> grade at William Annin Middle School on **Monday, December 12<sup>th</sup>, 2016**.

The Bernards Township School System has been administering this survey every other year since 1991. Dr. Kirk Harlow, a Public Health specialist who has worked with Bernards Township on several surveys, will be tabulating the results of the American Drug and Alcohol Survey. The intent of this survey is to measure the usage of drugs and alcohol of Bernards Township youth, as well as their views on the dangers of drugs and alcohol.

The survey is **anonymous**. Students will complete the survey via SurveyMonkey. This district will not track individual, specific student responses. No district employee will know how any individual student responds, and staff will not see the surveys when they are completed. The survey results will be tabulated, compiled, and analyzed via the research firm of Dr. Harlow. Your child may refuse to answer any question, simply by leaving the question blank on his/her form. The entire survey takes about 30 minutes to complete.

**Because your child is a minor, New Jersey law requires that you give permission for your child to take this survey. Whether or not you wish for your child to participate, it is critical that you complete the enclosed form and return it to the school by Wednesday, November 23<sup>rd</sup>.**

If you have any questions, you may contact Assistant Principal, Adam Torrisi at (908) 204-2610 Ext. 127 or Student Assistance Counselor, Barbara Bush at (908) 204-2610 Ext. 121. The survey can be previewed in the main office or via the email regarding the survey from the superintendent.

**Again, all parents must sign and return the enclosed form to the school no later than Wednesday, November 23<sup>rd</sup>.**

Thank you in advance for your support and cooperation,

*Lucy A. Forgione, MS, MCHES*  
Health Officer/Health Director

*Kaitlin V. Kordusky, MPH, CHES*  
Municipal Alliance Grant Coordinator

Encl.

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## Permission Form

### Required for Minors re: The American Drug and Alcohol Survey

*Participation:* I understand that my child's participation in this survey on drug and alcohol use is anonymous and voluntary, and that I may withdraw my consent at any time before the class period during which the survey is given.

\_\_\_\_\_ *Yes, I give permission for my child,*

\_\_\_\_\_  
(print child's name), who is in \_\_\_\_\_ (grade) to fill out The American Drug and Alcohol Survey with his/her class at William Annin Middle School on Monday, December 12<sup>th</sup>, 2016.

\_\_\_\_\_ *No, I do not give permission for my child*

\_\_\_\_\_  
(print child's name), who is in \_\_\_\_\_ (grade) to fill out The American Drug and Alcohol Survey with his/her class at William Annin Middle School on Monday, December 12<sup>th</sup>, 2016.

\_\_\_\_\_  
Please print your name (Parent or Guardian)

\_\_\_\_\_  
Signature (Parent or Guardian)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Homeroom Teacher

\_\_\_\_\_  
Grade

**Please return this form to your child's Homeroom teacher as soon as possible.**

***All forms must be returned whether or not you wish your child to participate by Wednesday, November 23<sup>rd</sup>.***