

## OPT OUT FORM

### NC Youth Tobacco Survey

Our school is taking part in the 2019 North Carolina Youth Tobacco Survey sponsored by the Centers for Disease Control and Prevention (CDC). The research survey will ask about tobacco use in 6<sup>th</sup> through 12<sup>th</sup> grade students.

Students will be asked to complete a questionnaire that takes about 35 minutes to complete.

Doing this paper and pencil survey will cause little or no risk to your child. The survey has been designed to protect your child's privacy. Students will not put their names on the survey. Also, no school or student will ever be mentioned by name in a report of the results. Your child will get no benefit right away from taking part in the survey. But, the results of this survey will help other children in the future. We would like all selected students to take part in the survey. But, the survey is voluntary. **No** action will be taken against the school, you, or your child, if your child does not take part. Students can skip any question that they do not wish to answer. In addition, students may stop participating in the survey at any point without penalty.

If you **DO NOT** wish your child to take part in the survey, please complete the bottom of this form and check the box below.

Return the form to the school in three days if you do **NOT** wish for your child to take part in the survey. Otherwise, you do not need to submit a permission form. If your child's teacher or principal cannot answer your questions about the survey, please call Jim Martin at (919) 707-5404 or Courtney Heck at (919) 707-5412 at the Tobacco Prevention and Control Branch of the NC Division of Public Health. Thank you.

Child's Name: \_\_\_\_\_ Grade: \_\_\_\_\_

I have read this form and know what the survey is about.

☐ My child may **NOT** take part in this survey.

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Phone Number: \_\_\_\_\_