



Butte Falls School District Opt Out Form for Student Surveys

Parent or Guardian or Adult Student: Please complete a separate form for each child and return the entire form to the address listed above.

I understand my rights regarding the district conduct of surveys, collection and use of student information for the Protection of Pupil Amendment (PPRA) purposes.

I would like my student _____ to be allowed to opt out of any surveys given in the 2022-2023 school year.

Parent/Guardian Name: _____

Parent/Guardian Signature: _____

Parent/Guardian email & phone number: _____
