

Dear Parent/Guardian,

This after-school program is part of the Partnerships in Social and Emotional Learning Initiative for all or part of the time from September 2017-June 2021. This Initiative, managed by Boston Public Schools (BPS) and Boston After School & Beyond (BASB), seeks to understand how after-school programs support students' social and emotional learning. Several Research Organizations will help with the Initiative: the National Institute on Out-of-School Time (NIOST), the PEAR Institute (PEAR), the RAND Corporation, and the Collaborative for Academic, Social and Emotional Learning (CASEL). **By signing this form, you acknowledge and agree to the following:**

**Data:** BASB, Research Organizations, and BPS will have access to the following information (from this Program and/or BPS): student program attendance, school, race, gender, grade, age/date of birth, English language learner (ELL) status, home zip code, school-year attendance (days present, days tardy, rate), discipline records (total suspension incidents, days suspended, expulsions), test scores, State Assigned Student Identifier (SASID) and Boston Public Schools ID. BPS may share information about each student's academic record with staff who help operate the Program for the purpose of program planning. These data are confidential and will be used only for evaluation to improve the quality of after-school programming.

**Confidentiality:** All data collected that may identify your child will be kept confidential. In public reporting of research findings, only group data and/or de-identified data will be reported. At no time will a public report identify an individual student in any way. The only exception to confidentiality will be in the case of any information disclosed that indicates a child is in any danger.

**Photo/Video Release:** BPS, BASB and/or their partners/agents may videotape or take photos of your child's participation in the program using video and/or digital photography. These images may be used for the purpose of sharing your child's participation and associated perspectives to a public audience. Images may be published, posted, or played through a variety of communication channels, including but not limited to print, television, and/or online.

**Please complete, sign and return.**

By signing below, I acknowledge that I have read, understand, and agree to the Initiative as described here.

Program in which your child is registering: \_\_\_\_\_

Child's Full Name (First, Middle, Last): \_\_\_\_\_

Child's Date of Birth: \_\_\_\_\_ Child's BPS ID : \_\_\_\_\_

Child's Gender: \_\_\_\_\_ Child's Current Grade (School year 2019-2020): \_\_\_\_\_

Child's School: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

**\*\*PARENT/GUARDIAN SIGNATURE\*\***: \_\_\_\_\_ **Date:** \_\_\_\_\_