



Dear Parent/Guardian of a K; 2<sup>nd</sup>; 4<sup>th</sup>; 7<sup>th</sup> or 10<sup>th</sup> Grade Student;

As part of a required school health examination, a student is weighed and his/her height is measured. These numbers are used to figure out the student's body mass index or "BMI". The BMI helps the doctor know if the student's weight is in a healthy range or is too high or too low. New York State Education Law requires that BMI and weight status group be included as part of the student's school health examination. A sample of school districts will be selected to take part in a survey by the New York State Department of Health. If our school is selected to be part of the survey, we will be reporting to NYS Department of Health information about our 10<sup>th</sup> grade students' weight status groups. Only summary information is sent. No identifying information about individual students is sent. However, you may choose to have your child's information excluded from this survey report.

The information sent to the NYS Department of Health will help health officials develop programs that make it easier for children to be healthy.

If you do not wish to have your child's weight status group information included as part of the Health Department's survey, please print and sign your name below and return this form to your school nurse.

If you have any concerns regarding your child's weight status please discuss it with your health care provider. If you have any questions regarding the NYS Health Department survey please contact your school nurse.

## BMI/WEIGHT CATEGORY SURVEY OPT OUT

If you **DO NOT** wish to have your child's weight status group information as part of the Health Department's survey this year, please print and sign your name below and return this form to your School Health Office.

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Please do not include my child's weight status information in the BMI/Weight Status Category school survey.

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Print Student's Name

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Date

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Print Parent/Guardian's Name

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Parent/Guardian's Signature