Form Approved

OMB No. 0920-0493

Expiration Date: XX/XX/XXXX

2017 and 2019 National Youth Risk Behavior Survey

Appendix N1

Letter to Teachers in Participating Schools

Dear Teacher:

We appreciate your classroom hosting the {Year} national Youth Risk Behavior Survey (YRBS), sponsored by the Centers for Disease Control and Prevention (CDC), Division of Adolescent and School Health. Results from the YRBS will help to determine the extent to which adolescents practice health risk behaviors, and to develop education programs and other strategies to help reduce these behaviors. A report summarizing the results will be published the following year and your school will be notified when the report is available for download.

You play a very important role in the survey. Your class was randomly selected and cannot be replaced. Your support and encouragement are necessary to ensure a high rate of participation among your students. A high participation rate is needed to produce valid national data.

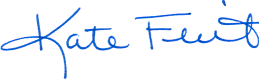
To prepare for the YRBS administration, please follow the instructions below.

1. The enclosed **Summary of School Arrangements** lists the classes that were randomly selected to participate and the date of survey administration. Other details such as administration logistics may be included as well. Thank you for reviewing this document.
2. **Distribute a parental permission form** to each student in your class(es) **at least 10 days prior** to the survey administration date. Read to the class “Instructions to be Read When Distributing Permission Forms.” Please remind students to return their form as soon as possible.
3. Follow the directions on the **Data Collection Checklist** and use it to **track and record** the return of all permission forms. Please be sure to complete this form prior to the survey date so that we can easily determine which students are eligible to participate in the survey. Our survey representative will collect this form from you; it will be destroyed after the completion of data collection.
4. Distribute a reminder slip and/or another parental permission form to students who do not return a form **as of 3 days prior to the survey administration date**.
5. On the day of the survey, please plan an alternate activity for those students who are not participating or complete the survey early.

Survey procedures have been designed to protect your students’ privacy and allow for anonymous participation. The survey will be administered by a specially trained survey representative and will take about 35 minutes. During survey administration, you will be asked to remain at the front of the classroom to increase student candor. Enclosed is a summary fact sheet about the study. A copy of the questionnaire is available with your school’s contact person, if you would like to view it.

The participation of your students in the YRBS will help the CDC, educators, and public health officials assess and improve efforts to reduce priority health risk behaviors among adolescents throughout the Nation. If you have any questions, please call me toll-free at 1-800-675-9727 between 8:30 a.m. and 5:00 p.m. eastern time. Thank you again for your cooperation.

Sincerely,



Kate Flint, Project Director

National Youth Risk Behavior Survey