

Form Approved  
OMB No. 0920-xxxx  
Expiration Date: xx/xx/xxxx

2025 and 2027 National Youth Risk Behavior Survey

Attachment Q5

Letter to Agreeing Schools for the national YRBS



**We ask that you please:**

1. **Distribute** the enclosed packets at your earliest convenience. Please ask teachers to distribute the parental permission forms as soon as possible.
2. **Check-in** with teachers a few days later to make sure the parental permission forms have been distributed. Forms should be distributed to students **at least 10 days before the survey administration date.**
3. **Identify** someone within the school to whom participating teachers may refer students, should they have questions. This person may be a guidance counselor, school nurse, or other staff member.
4. **Complete** the enclosed School Enrollment Form and the School Award Form. Please give them to the study representative on the day of the survey, fax them to the number on the form, or scan/email them to the email address on the form.

Dear Principal/School Contact:

Thank you for your school's participation in the [YEAR] national Youth Risk Behavior Survey (YRBS), sponsored by the Centers for Disease Control and Prevention (CDC), Division of Adolescent and School Health.

Monitoring the behaviors that put our youth at greatest risk for harm provides essential information used to improve health outcomes for students in our schools. A report summarizing the results will be published in [YEAR], and your school will be notified when the report is available for download.

Enclosed is a packet of materials for each teacher whose class was selected to participate in the survey. These packets contain helpful information for each teacher, including a schedule of when the survey will occur, a survey fact sheet that explains what the YRBS is, and parental permission forms. In addition, we include a script teachers can read when distributing the permission forms and a log to track their return. Any returned permission forms should remain at the school and be maintained according to your school's parental permission form policy.

Your support and encouragement will help ensure students' voices are heard so that CDC, educators, lawmakers, doctors, community organizations, and public health officials are able to assess and improve efforts to reduce priority health risk behaviors among adolescents. 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,

A handwritten signature in black ink that reads "Alice Roberts".

Alice Roberts, Project Director  
National Youth Risk Behavior Survey