

I4. Class Participation Form

Class Participation Log				
ClassID	Grade	ClassName	Period	Subject
Please provide the following information for the class section surveyed:				
On what date did you administer the survey?				
Number of students enrolled in this class section:				
Number of students absent on survey day:				
Number of students who participated in the survey:				
How many students returned "opt out" forms from parents?				
Please document any issues or circumstances affecting participation in the survey:				
Please include the number of students who had technical issues (e.g. had to stop and restart the survey), as well as information on other administrations issues such as large disruptions or reasons for a high number of absences. Do not include any PII (including student names) in this form.				

Public reporting burden for this collection of information is estimated to average 15 minutes per survey, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Office of Operations, Food and Drug Administration, Three White Flint North, 10A-12M, 11601 Landsdown St., North Bethesda, MD 20852, PRAStaff@fda.hhs.gov, ATTN: PRA (0910-0932).