SATCHEL PULSE SKILLS ASSSESSMENT

If you do NOT wish to have your student participate in the SLSD Satchel Pulse Skills Assessment, you must sign and return this form indicating your refusal to grant permission to your student's school's Main Office. The refusal must be received by the school **by Monday, Oct 23, 2023.**

STUDENT NAME: _____ ("Student")

I _____ am the parent/guardian of _____

and **refuse** permission for Student to participate in the Satchel Pulse screener.

My consent shall be refused until such time as I provide written consent for my student to participate.

_____ _____

Signature of Parent/Guardian Date of Consent **Refusal**

SATCHEL PULSE SOCIAL EMOTIONAL LEARNING CURRICULUM

If you do NOT wish to have your student participate in the SLSD Satchel Pulse Social Emotional Learning curriculum, you must sign and return this form indicating your refusal to grant permission to your student's school's Main Office. The refusal for your student to participate in the SLSD Satchel Pulse Social Emotional Learning curriculum may be returned to your student's school's Main Office at any time.

STUDENT NAME: _____ ("Student")

I _____ am the parent/guardian of _____

and **refuse** permission for Student to participate in the Satchel Pulse Social Emotional Learning Curriculum.

My consent shall be refused until such time as I provide written consent for my student to participate.

_____ _____

Signature of Parent/Guardian Date of Consent **Refusal**