

Date: 9/7/2022

National Clinical Trials #: NCT05219422

Study Title: Improving the Implementation of Evidence-based  
Drug Prevention Programs in Schools

**PARENT/LEGAL GUARDIAN CONSENT FORM FOR CHILD'S SURVEY PARTICIPATION**  
**Project ALERT**

**PRINT** name of your child:

First Name \_\_\_\_\_ Middle Name \_\_\_\_\_ Last Name \_\_\_\_\_

I have read (or someone has read to me) the information in the Project ALERT Survey Information Letter which explains the study and my child's involvement.

**Please mark "Agree" or "Refuse"**

Agree

I agree to allow my child to complete the Project ALERT student surveys to measure change in attitudes and behaviors.

Refuse

I refuse to allow my child to complete the Project ALERT student surveys.

**SIGNATURE OF PARENT OR LEGAL GUARDIAN**

Today's date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Are you the child's:  Parent  Legal Guardian

Parent/Legal Guardian's Address: \_\_\_\_\_

City, State: \_\_\_\_\_ Zip: \_\_\_\_\_

Parent/Guardian's Telephone Number: \_\_\_\_\_

Parent/Guardian's Email Address: \_\_\_\_\_

Print NAME of parent or legal guardian: \_\_\_\_\_

First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_



SIGNATURE of parent or legal guardian

Please return to RAND in the included pre-paid envelope, or to your child's teacher.

RAND Corporation  
ATTN: Survey Research Group - Data Reduction  
Project ALERT  
1776 Main Street  
Santa Monica, CA 90401