

Dear Parent/Guardian,

Your child's school has partnered with Inspiring Minds to provide the innovative, mindfulness-based socialemotional learning program, ResilientKids<sup>™</sup>, during the school day to build skills in self-regulation, stress management, perseverance, and empathy - the foundations to academic achievement, college & career readiness, and life-long success. Our professionally trained, dedicated instructors work in the classroom, in partnership with students and teachers from September to June, in a weekly 30-minute class. There is no cost to you for this program.

We are asking today for your consent to join our impact study.

To better understand the impact of our program, Inspiring Minds would like your permission to request and collect data from your child and their student record from your child's school. The student record has information such as your child's attendance, scores on assessments (literacy scores, for example), types of services they may receive, discipline history, and other information. In addition, we implement a survey to help us understand their mindfulness knowledge at the beginning and again at the end of the school year. We also ask students in 6<sup>th</sup> grade and up to complete the <u>Mindful Attention Awareness Scale</u> and the <u>Perceived Stress Scale</u>. Having this information will help us better understand our impact, how our services work, and how we might improve them.

Federal law requires us to keep educational information about your child private. Therefore, we will keep your child's records private by not providing any of your personal information to anyone not directly involved in Inspiring Minds or your child's school. We also share information with the people who fund our programs or are interested in learning more about what we do and how we do it. However, that information is only shared in the aggregate. That means we only share general information, such as 55% of our participants are English language learners.

Thank you! Please call Inspiring Minds at 274-3240 or email us at inspire@inspiringmindsri.org if you have any questions!

Please return this data consent form to your child's teacher. You may also complete this form online by taking a picture of this QR Code.



		Inspiring Mind Data Consen Consentimiento de datos de Resilientkid
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Child's na	me/ Nombre del niño:	
Child's Da	te of Birth/ Fecha de nacimiento del niño:	
Teacher's	name/Nombre de maestra/aula:	
School/Es	cuela:	
PLEASE w	rite YES or NO for each question:	Por favor responda SÍ o NO a cada una de las siguientes preguntas:
	I understand why Inspiring Minds is asking my	
	permission to access my child's student record, and I grant permission to the school district	I understand why Inspiring Minds is asking my permission to access my child's student record,
	where my child is enrolled, to share that	and I grant permission to the school district
	information with Inspiring Minds.	where my child is enrolled, to share that
	I grant permission for Inspiring Minds to share	information with Inspiring Minds.
	information learned from the assessments and	I grant permission for Inspiring Minds to share
	interviews with my child's school district to discuss coordination of services.	information learned from the assessments and
	discuss coordination of services.	interviews with my child's school district to discuss coordination of services.
	I permit my child to participate in the	
	pre and post-assessments and the Developmental Asset Profile Survey.	I permit my child to participate in the pre and post-assessments and the
	Developmental Asset Frome Survey.	Developmental Asset Profile Survey.
	I permit my child's name, photo, and quotes to	
	be used by Inspiring Minds for the purposes of	I permit my child's name, photo, and quotes to be used by Inspiring Minds for the purposes of
	marketing the program.	marketing the program.
	Please add me to the Inspiring Minds mailing	
	list.	Please add me to the Inspiring Minds mailing lis
Name of F	Parent/Guardian /Nombre del padre, madre o tutor legal	al:
Relationsh	nip to child/ Parentesco con el niño:	
Address/	Dirección:	
City, State	e, Zip/ Ciudad, estado y código postal:	
Phone/ Te	eléfono:	
Email/ Co	rreo electrónico:	
Signature	of parent/ guardian/ Firma del padre, madre o tutor leg	gal:
		Date: