



Richard Zipp Asst. Superintendent of Student Support Services & Accessible Education  
25 Corporate Park Drive P.O. Box 396 Hopewell Junction, NY 12533 (845) 298-5000 x40103 Fax (845) 896-1693

October, 2019

Dear Parent/Guardian:

Recent changes to the New York State Education Law require that BMI (body mass index) and weight status groups be included as part of a student’s school health examination. Our school was randomly selected by the New York State Department of Health to take part in a survey. Being selected requires our District to report to the New York State Department of Health information about our students’ weight status groups. The purpose of sending this information to the New York State Department of Health is to help health officials develop programs that support children being healthier.

As part of the required school health survey, the nursing department will gather all relevant information from your child's health record as provided by you i.e., physical from primary physician. These numbers i.e., weight and height, are used to figure out the student’s BMI or body mass index. The BMI helps the doctor or nurse know if the student’s weight is in a healthy range or is too high or too low. *No names and no information about individual students will be sent to New York State Department of Health, only a summary of the information collected.* However, parents may choose to have their child’s information excluded from this survey report.

**The survey will only be conducted for students in grades 1, 2, 4, 6, 8, 10, and 12.**

If you do not wish to have your child’s weight status group information included as part of the NYS Health Department’s survey this year, please sign your name below and return this form to your school Health Office by Friday, November 1, 2019.

Sincerely,

Richard Zipp  
Asst. Superintendent of Student Support Services & Accessible Education

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Please do not include my child’s weight status information in the **2019-2020** New York State Health Department Survey collecting summary information about students’ weight and height.

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Print Child’s Name

\_\_\_\_\_

Date

\_\_\_\_\_

Print Parent’s Name

\_\_\_\_\_

Parent’s Signature