

# 2027 Alaska Youth Risk Behavior Survey

## Sample Parent/Guardian Permission Form

The \_\_\_\_\_ School District is participating in the Alaska Youth Risk Behavior Survey (YRBS). The survey is sponsored by the Alaska Department of Health (DOH) and will be given during the spring semester of the 2026-2027 school year. Alaska students complete the survey electronically.

Your **written consent is required** for your student to take this survey and survey results for individual students or classes are **never** identified, analyzed, or reported.

The YRBS is an anonymous and voluntary survey conducted in high schools throughout Alaska and the U.S. The Centers for Disease Control and Prevention developed the survey to collect information about behaviors related to the health and well-being of students, and the results are used by a variety of organizations to understand and meet the needs of Alaska teens. School districts and community organizations use YRBS results to identify emerging health issues, track changes over time, and create and obtain funding for programs that support teens.

The [2025 Alaska YRBS questionnaire](#), as well as [Alaska YRBS results](#) are posted online and the 2027 will also be posted when approved.

The YRBS is given in a way that protects your student's privacy. Students do not put their name or any other identifying information on the survey and may skip any questions they do not want to answer. All students' responses will remain anonymous. Individual student responses are never studied or shared with others. DOH only shares results that describe groups of students, for example all students within a school district, or all 9<sup>th</sup> grade students.

It is important that a high percentage of students participate in the survey this year in order to collect meaningful information on the health of Alaska teens. However, you decide whether your student participates, and **your written consent is required** for your student to take the survey. There will be no actions against you or your student if your student does not participate.

Please read the section below, check the appropriate box, and return this form to your student's school. If you have any questions, please contact the Alaska YRBS Program at [YRBS@alaska.gov](mailto:YRBS@alaska.gov) or visit our [website](#).

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- YES, my student may participate in the survey.**
- NO, my student may not participate in the survey.**

Student's Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_