*Premier Teachers, Premier Leaders, Premier Schools*

Date:

Dear Parent(s):

Providing an appropriate learning program for each student is an important goal of our school. In working with students, it is sometimes helpful to conduct a screening of vision and hearing acuity. These screenings take only a few minutes and can identify whether or not an acuity problem may be present that could possibly interfere with a child’s ability to succeed to his/her potential in the classroom. These screenings are conducted at the school and are available at no cost to you.

We would like your permission to conduct a vision and hearing screening with your child, . We will notify you if any problems are identified in the screening. Please feel free to call if you have any questions or would like to know the results of the screening.

Sincerely,

Administrator Signature

Yes, I agree to the vision/hearing screenings

No, I do not agree to the vision/hearing screenings because

Parent/Guardian’s Signature Date