



## *Sachem Central School District at Holbrook*

Mr. James J. Nolan  
Superintendent of Schools

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### **Physical Activity Project Consent Form Grades K-4**

Dear Parent/Guardian:

Our school district has received an incredible and rare opportunity for the Physical Education Program: a Carol M. White PEP Grant from the Federal Department of Education's Office of Safe and Drug-Free Schools. This grant's funding is focused on reorganizing our Physical Education Program to be aligned with state standards. The funding offered through the three year grant is used to provide curriculum, software, equipment, staff training and program infrastructure development. This reorganization will help prepare our students to lead active and healthy lives. To meet this goal, there will be an emphasis on helping students increase their health and fitness knowledge and form healthy habits. The PEP grant will provide the resources to develop a quality, standards-based program which could not be accomplished through district resources alone.

As part of this grant there is required data that must be collected on physical activity, nutrition and physical fitness. Your child's participation is voluntary, but it will enhance his/her health and understanding of living a healthy and active life. Data collection will take place in and out of school. Your child's grade in physical education will not be affected in anyway by participation or non-participation in the collection of data. The data collected in this project will take place in five one-week windows this school year. During each data collection window your child will need assistance with two pieces of data: a four day pedometer log and a short survey on nutrition and physical activity. The last piece of the data collection will be completed in your son/daughter's physical education class and will measure his/her cardiovascular fitness through a Pacer Test.

Any data used to describe the results of this project will not use your child's name or other personal information. Only general group averages will be described in the project's report to the Department of Education. This consent form allows your child to be considered for randomized sampling of the district's student population and possibly being chosen for one or more of the five data collection windows. An explanation of randomized sampling is included in this packet along with samples of the log and survey. If your son/daughter is selected in the project, an additional packet of directions and resources will follow. To be involved in the project we must have a parent/guardian signature. Please check the appropriate box below to indicate whether or not you agree to let your son/daughter be included in the physical activity and nutrition project. Sign on the appropriate line and return to your child's PE teacher.

- ☐ I agree to let my son/daughter participate in this project
- ☐ I DO NOT agree to let my son/daughter participate in this project
- ☐ I have Internet access at home (Internet access allows for completion of online nutrition and physical activity surveys)

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Student Name

\_\_\_\_\_  
Date