

GYTS Parent Consent Form

[Name of School] is participating in the Global Youth Tobacco Survey (GYTS) sponsored by [Name of Implementing Agency]. The survey will gather information on tobacco use behaviors of students in <Grades>. Questions will be asked about tobacco use, knowledge and attitudes toward tobacco, tobacco cessation, secondhand smoke (SHS), media and advertising, and school curriculum.

GYTS has been approved by the [Name of Implementing Agency].

Completing this paper and pencil survey poses no risk to your child. Survey procedures have been designed to protect your child's privacy and allow for anonymous participation. No school or student will ever be mentioned by name in a report of the results.

If you have any questions, please contact [Name and Contact Information].

Thank you for your cooperation.