



1004 Hancock Road  
Bullhead City, Arizona 86442  
Phone: (928) 758-3961  
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Dear Parent or Guardian,

Your child is invited to participate in our **Annual Fall Student Survey**, which is designed to gather important feedback from students about their school experience. By hearing directly from students, we can ensure that their **voices** are heard and that their insights help shape the future of our school community. The feedback we collect will play a vital role in making improvements to create a more **supportive and positive learning environment** for all students.

**Survey Details:**

- **Grade Levels:** Grades 3-8
- **Survey Dates:** Week of October 6, 2025
- **Survey Duration:** Approximately 10 minutes
- **Platform:** Panorama (online)

Participation is **voluntary**. However, we would like all students to take part in the survey. The results of this survey will be used to guide planning in schools as we strive to ensure a positive learning environment. The changes made at the school may help your child and other children in the future, even if the benefits are not noted right away. Please sign and return the consent form below. If you choose not to have your child participate, no action will be taken against your child, and there will be no consequences for the school. You may review the survey questions at any time on our district website: <https://www.bcsd15.org/fall-student-survey>, on the “News” page.

Thank you for your continued support as we work to create a school environment where every student can thrive!

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**Annual Fall Student Survey Consent Form:**

**Student's Name (Please Print):** \_\_\_\_\_

**Grade:** \_\_\_\_\_

- ☐ **YES**, I give permission for my child to participate in the **Annual Spring Student Survey**.  
☐ **NO**, I do not give my child permission to participate in the Annual Spring Student Survey

**Parent's Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_