



CSADS

Canadian Student
ALCOHOL & DRUGS
SURVEY

www.csads.ca
csads@cci-research.com
1-866-450-4907

Permission Form

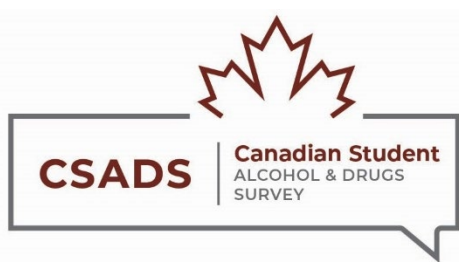
Please complete this Permission Form so that your child can take part in the Canadian Student Alcohol and Drugs Survey (CSADS). If you have multiple children who are being asked to participate in the survey, please complete one form for EACH child. If your child is _____ years of age or older, they can decide on their own if they want to participate in the survey, but they **MUST** also return a permission form, indicating their consent to participate.

PLEASE COMPLETE ONLINE at <https://csads.cci-research.ca/Consent> (Permission code: _____)

OR

RETURN THIS FORM to

STUDENT'S SCHOOL:		
OTHER :	My teacher's name is:	<input type="text"/> (Please print)
NAME OF STUDENT: (print in capitals)	First: <input type="text"/>	Last: <input type="text"/>
STUDENT'S GRADE:	<input type="text"/>	
NAME OF PARENT/GUARDIAN: (print in capitals)	First: <input type="text"/>	Last: <input type="text"/>
Permission Decision (please check <u>ONLY</u> one)		
Parent If child is younger than	<input type="radio"/> YES , I (parent/guardian) give permission for my <u>child</u> to participate. <input type="radio"/> NO , I (parent/guardian) do not give permission for my <u>child</u> to participate.	
If student is or older	<input type="radio"/> YES , I (student) am _____ years of age or older and AGREE to participate. <input type="radio"/> NO , I (student) do NOT AGREE to participate.	
SIGNATURE/DATE:	Signature: <input type="text"/>	Date: <input type="text"/>



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PRIVACY NOTICE

The personal information collected as part of the Canadian Student Alcohol and Drugs Survey (CSADS) is governed in accordance with the Privacy Act. Only the information needed to administer the survey and that is necessary for the analysis being undertaken will be collected. Participation in the CSADS is completely voluntary and any student is free to refuse to participate at any time.

Purpose of collection: Your personal information is required because understanding Canadian trends in alcohol and drug use is vital to the effective development, implementation and evaluation of strategies, policies and programs aimed at addressing higher risk substance use.

Other uses or disclosures: A master file data set will be retained and securely stored by the Contractor. The data collected will be used in aggregate form to generate results at the school, province, and national levels. Each participating school will receive a summary report displaying the key results. A data file with no board or school information will be provided to Health Canada, and an anonymized public release data file will be made available to the public by Health Canada. No students will be named in any of the responses collected or in the resulting reports or data sets. In limited and specific situations, personal information may be disclosed without your consent in accordance with subsection 8(2) of the Privacy Act.

Refusal to provide the information: There will be no consequences for any student who chooses not to participate in the survey or provide any specific piece of information within the survey. Any student or parent who, in an active consent school, refuses to provide the personal information required on the permission form will result in the student not being allowed to participate in the survey.

For more information: If you have any questions about the privacy of your information, please contact the CCI Research Company Security Officer, Linda Hudson at (888)246-8068 or linda@cci-research.com. This personal information collection is described in Info Source, available online at www.infosource.gc.ca. Refer to the personal information bank PSE 938.