Youth Participation in Youth Development Outcome Measurement Surveys

I, (name of parent/guardian), give per	mission for Tinker AFB
Youth Programs to survey my child, (no	ame of child), about his or
her Youth Programs experience and behaviors, skills and attitudes using	ng Boys & Girls Clubs of
America's Youth Development Outcome Measurement Tool Kit surve	eys.
I understand that the purpose of the surveys is to help Tinker AFB You needs of the children/youth it serves. My child's survey answers are c anonymous. I also understand that my child's responses will be autom with the responses of other Youth Programs members for any public p	ompletely confidential and natically grouped together
Finally, I understand that I can receive a copy of this signed consent le survey questions by contacting the Youth Center at 734-7866.	etter and/or a copy of the
Name of Parent/Guardian:	
Signature of Parent/Guardian:	
Date:	

Base Affiliation/Please Circle One

Active Duty Air Force
Active Duty Army
Active Duty Navy
Active Duty Marines
Reserves
National Guard
DOD Civilian
Contractor
Retiree
Wounded Warrior