

I hereby give permission to *the Center for Prevention Research and Development at the University of Illinois* to release a copy of our **SCHOOL'S** Illinois Youth Survey report(s) to the following individual(s) and organization(s) for use in assessment and evaluation. We agree to release our IYS reports for the following year(s):

□ 2008 □ 2010 □ 2012 □ 2014 □ 2016 □ 2018 □ Other \_\_\_\_\_

## FOR THE FOLLOWING TYPE(S) OF REPORT(S):

□ School frequency report and trend report (summary of all IYS responses per grade)

Custom data reports (special requests for customized analysis of the results beyond the frequency reports)

## SCHOOL INFORMATION

SCHOOL		
NAME		
ADDRESS		
CITY	ZIP	

## **RELEASE REPORTS TO:**

ORGANIZATION	ORGANIZATION	
NAME	NAME	
EMAIL	EMAIL	
PHONE	PHONE	

## AUTHORIZED SCHOOL REPRESENTATIVE RELEASING SCHOOL REPORT(S) REFERENCED ABOVE

The designated representative must have the authority to release data with his or her signature.		
NAME		
TITLE		
EMAIL	PHONE	

(Signature of Authorized Representative)

(Date)

Return this form by fax or email to Center for Prevention Research and Development at the University of Illinois: Fax: 217.244.0214 Email: cprd-iys@mx.uillinois.edu