Dear Parent,

Your child will be given the opportunity to hear a powerful, live presentation by Aim for Success, Inc., called ***Empowered***. This program discusses bullying, its impact and how to prevent it from happening. Aim for Success is a nonprofit, youth health education organization whose mission is “helping young people make healthy choices that will give them freedom to reach their dreams and goals”. Founded in Dallas, Texas in 1993, over 2.6 million students, parents and educators have been served. You can visit the Aim for Success website at www.aimforsuccess.org or contact the school if you have questions.

**Please attend the Parent Program to preview what your child will see and receive information on prevention and ideas to help your child make a positive difference in the world around them.**

PARENT PREVIEW DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ STUDENT PROGRAM DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**RETURN THIS PORTION ONLY IF YOU** **DO NOT** **WANT YOUR CHILD TO ATTEND THE PROGRAM*.***

I **DO NOT** want my child, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, to attend the ***Empowered*** program.

Parent or Guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dear Parent,

Your child will be given the opportunity to hear a powerful, live presentation by Aim for Success, Inc., called ***Empowered***. This program discusses bullying, its impact and how to prevent it from happening. Aim for Success is a nonprofit, youth health education organization whose mission is “helping young people make healthy choices that will give them freedom to reach their dreams and goals”. Founded in Dallas, Texas in 1993, over 2.6 million students, parents and educators have been served. You can visit the Aim for Success website at www.aimforsuccess.org or contact the school if you have questions.

**Please attend the Parent Program to preview what your child will see and receive information on prevention and ideas to help your child make a positive difference in the world around them.**

PARENT PREVIEW DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ STUDENT PROGRAM DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**RETURN THIS PORTION ONLY IF YOU** **DO NOT** **WANT YOUR CHILD TO ATTEND THE PROGRAM*.***

I **DO NOT** want my child, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, to attend the ***Empowered*** program.

Parent or Guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_