



Rio Rico High School HEARING SCREENING

Shelly Vroegh
Principal

Today's Date _____

Student Name _____ Date of Birth _____

School Year _____ - _____ Grade _____

Dear Parent/Guardian,
Arizona regulation (A.R.S. 36.899.01) and Arizona Health Service Title 9 (R9-13-103) requires a hearing screening be completed on students in specified grades, which are: Pre-K, Kinder, 1st, 2nd, 6th, 9th, and all students with special needs (yearly permission is required for students with special needs). Also, on occasion, a teacher may request a hearing screening be completed on a specific student.

The state requires parent permission to perform hearing screenings at school. To give permission for testing during school hours, please sign designated area below. Giving permission includes: *initial* (first) screening, a *second* screening (done only if student did not pass first screening), and a *possible referral* to the school Audiologist (Southeast Regional Cooperative) (Referred *only* if the student does not pass initial *and* second screenings). However, ARS. 36.899.04 allows Parents/ Guardians to decline permission for testing during school hours. If you choose to decline testing to screen for hearing difficulties at school, please sign the designated area below. Please provide a completed hearing screening report from your child's physician to your child's school Health Office.

I, _____, Parent / Guardian, **GIVE PERMISSION** for all necessary hearing screenings to be completed on my child (at no cost to me) during school hours. I understand that I will be notified by phone or letter **if** additional screening is necessary by the school Audiologist and I will receive a copy of the Audiologist's report by mail.

I, _____, Parent / Guardian, **DECLINE PERMISSION** for my child to receive a hearing screening at school. I understand it is my obligation to have my student's hearing evaluated by a private physician and to provide the school Health Office with a copy of the physician's report. I also understand that I may change my choice in the future and give verbal or written permission for my student to have a hearing screening at school.



Rodney K. Rich
Superintendent

Joel Kramer
President, Governing Board

590 Camino Lito Galindo. Rio Rico, AZ 85648
(520)375-8707 (520)375-8708 FAX (520)377-9556