



Parent Permission to Pilot SMHP

Date: _____

To the Parents of _____:

The **Size Matters Handwriting Program** is being piloted in your child's classroom. This is a new instructional approach that is evidence-based, measurable, embeddable, easy and fun. The Pilot Study will last 10 weeks. It will not interfere with academic content or other aspects of your child's educational program. In fact, the participants will practice printing vocabulary and language from the current literacy, social studies, science and even math books.

We would like to include your child in this study. We would also like to take pictures of your student using the various materials and strategies, as well as before and after samples of his/her printing.

Please sign below indicating your consent. There is no penalty for not participating.

- My child _____ has permission to participate in the SMHP Pilot Study.
- My child's printing may be photographed for documentation and educational purposes. I am aware and give approval for photos of my child's printing to be shared with other educators, therapists and professionals.
- My child may be videotaped participating in the various SMHP instructional strategies.

Thank you very much for your attention.

Sincerely,

School: _____

District: _____

Address: _____
