



**HHS Opt-Out Form**  
**Project SUCCESS Student Assistance Professional (SAP)**

The goals of Project SUCCESS are to help prevent and reduce alcohol, tobacco, and other drug use and to improve school performance. To accomplish these goals, students will have the opportunity to participate in school-wide awareness programs, classroom discussions, extra-curricular activities, and **small group and individual meetings**. The program will provide alcohol, tobacco, and other drug prevention, education, and intervention services to students.

Please use this form if you do **NOT** want your child to meet one-on-one or in a small group with our Student Assistance Professional (SAP), and return it to our school office.

I do **not** want my student (named below) to meet one-on-one or in a small group with our Student Assistance Professional (SAP).

Student Name (please print): \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Note: Any minor thirteen years or older may request and receive outpatient treatment without the consent of the minor's parent. RCW 71.34.530