

SOUTHGATE INDEPENDENT SCHOOL DISTRICT

*6 WILLIAM BLATT AND EVERGREEN
SOUTHGATE, KENTUCKY 41071-3151
859-441-0743 Fax 859-441-6735*

September 17, 2026

Dear Northern Kentucky University Institutional Review Board:

The purpose of this letter is to inform you that I give Clay Driscoll of NKU's Institute for Health Innovation permission to access testing scores of students that take part in the College Bound Summer Camp at NKU. This permission is granted under the condition that each individual students' and their parents also provide written consent and assent respectively.

This also serves as assurance that this school complies with requirements of the Family Educational Rights and Privacy Act (FERPA) and the Protection of Pupil Rights Amendment (PPRA) and will ensure that these requirements are followed in the conduct of this research.

By agreeing to this study, I am certifying that:

- ☒ I have the authority to grant permission for research to be conducted at this institution.
- ☒ I understand the purpose and procedures of this research study.
- ☒ The researcher can collect data from this district.
- ☒ I am aware that results from this study may be submitted/presented/published outside of NKU and outside of this institution.

Sincerely,

(Signature)

(Printed Name)

(School District)

BOARD OF EDUCATION MEMBERS

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