



WEST CENTRAL COMMUNITY UNIT SCHOOL DISTRICT #235

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District Office
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February 27, 2025

Dear Parent or Guardian,

We are writing to inform you about a student survey that will be administered at your child's school called the Illinois 5Essentials Survey. This is the twelfth year the Illinois State Board of Education will implement this survey across the state. This survey is based on 30 years of research at the [University of Chicago Consortium on School Research](http://www.uchicago.edu/research/consortium). It asks students about their experiences in school, giving school leaders critical student input to help develop school improvement plans.

Student participants will be required to log-in using their state student ID and birth date in order to complete the survey. Students' identities will be completely confidential. Teachers or administrators will never see individual responses to survey questions and will only receive aggregated information, such as the total percentage of students who agree homework assignments help them learn the course material.

Please be aware that under the Protection of Pupil Rights Act, 20 U.S.C. Section 1232(c) (1) (A), you have the right to review a copy of the questions asked of your student(s). Survey questions can be found on the UChicago Impact [Support Center](https://impactsurveysupportcenter.force.com/s/article/illinois-5essentials-survey-questions) (<https://impactsurveysupportcenter.force.com/s/article/illinois-5essentials-survey-questions>).

If you do not want your child to participate, fill out the information below and ask your child to return this sheet to his or her teacher. West Central will start to administer this survey no sooner than Wednesday, March 5, 2025. Please submit this form to the office by Monday, March 3, 2025 if you do not want your child to participate. There is nothing you need to do if your student is able to complete the survey.

Thank you for your cooperation,

Stacey Day
Superintendent

School Name: _____
(Please Print)

I **DO NOT** want my child, _____, to take part in the Illinois 5Essentials Survey.
CHILD'S NAME (PLEASE PRINT)

SIGNATURE OF PARENT OR GUARDIAN

DATE