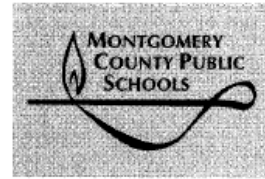


Cabin John Middle School

10701 Gainsborough Road
Potomac, Maryland 20854-2599
301-469-1150



November 22, 2011

Dear Parents and Guardians:

We are pleased to inform you that we are getting ready to kick-off our 2011-2012 Peer Buddy Program at Cabin John Middle School. This program will foster mutual respect, caring, and co-operation among students, therefore supporting one of our school objectives. We plan to utilize sixth, seventh, and eighth graders as volunteers in our self-contained special education classes. Student volunteers serve as buddies who assist special needs students primarily during PRIDE time on Tuesdays, Wednesdays and Thursdays. Some volunteers may also help at lunch or at the beginning or the end of the day. The volunteers may participate in activities such as: adapted PE, playing board games, reading, cooking, and academics.

All volunteers in the Peer Buddy Program will gain a better appreciation and understanding of the unique strengths and needs of our special education students. In addition, the Peer Buddy Program positively impacts the lives of our special needs students by providing opportunities for one-to-one friendships, therefore improving the overall school environment and further promoting our "Be Nice Every Day, In Every Way" campaign. This program is also a great way for students to earn Student Service Learning (SSL) hours.

On Tuesday, November 22nd your child attended the Peer Buddy Information Meeting and expressed an interest in volunteering in this program. Please sign below to indicate that you give your child permission to participate and have him/her return this form to Mrs. Watts in the Counseling Office by **Tuesday, November 29th**. We look forward to making the Peer Buddy Program an excellent partnership among students. Please feel free to contact me at (240) 406-1560 or at sara_e_watts@mcpsmd.org with any questions.

Sincerely,

Mrs. Sara Watts
Peer Buddy Faculty Sponsor

Student Name: _____

Grade: _____

Student ID Number: _____

PRIDE Teacher: _____

Parent/Guardian Signature: _____

Date: _____

Parent/Guardian Name (please print): _____

Phone: _____