

164 South Prospect Avenue • Park Ridge, IL 60068 • (847) 318-4300 • F (847) 318-4351 • d64.org

Dr. Lori Lopez, Assistant Superintendent for Student Learning

Dear Parents of Students in Grades 6-8,

On **Monday**, **August 21**, **2017** all of North America will experience an eclipse of the sun. A solar eclipse occurs when the moon blocks any part of the sun. This is the first time since 1918 a solar eclipse will be visible on a path across the entire continental United States.

The eclipse will occur in our area beginning at 11:54 a.m. and ending at 2:42 p.m.; nearly 90% of the sun will be covered at 1:19 p.m. To participate in this event, all schools has organized a <u>structured</u>, <u>supervised</u> viewing opportunity for students.

Safety during the eclipse viewing is our top priority. Looking directly at the sun is unsafe. Because the sun will never be totally covered during our eclipse experience, students will be required to wear special eclipse glasses during the entire time they are outside. Homemade filters or ordinary sunglasses, even very dark ones, are not safe for looking at the sun. We have purchased NASA-endorsed, eclipse-safe viewing glasses for all students and staff. For more information regarding the safety certification of the special viewing glasses, please visit <a href="https://eclipse.aas.org/eye-safety/safe-viewing">https://eclipse.aas.org/eye-safety/safe-viewing</a>). If our glasses order is delayed due to the volume of orders being processed, students will enjoy televised coverage of the event.

Because of these safety concerns, other precautionary measures will be taken to protect students:

- All students participating in the eclipse viewing are required to have a completed permission form (see enclosed form).
- P.E. classes during the eclipse event will be held indoors.
- Students will have indoor recess during the time of the eclipse.
- Some students will have the opportunity to participate in eclipse viewing during science class or through grade-level activities. Others are invited to participate through supervised observations during recess time. Viewing schedules will be finalized at the start of the school year.

A parent signature on the enclosed form is **required by Friday, August 18** in order for students to participate using the eclipse glasses. Students whose parents either do not complete this form or choose to opt out their child will view televised coverage of the event.

(continued)

More information about the 2017 solar eclipse can be found on NASA's website at <a href="https://eclipse2017.nasa.gov/">https://eclipse2017.nasa.gov/</a> and on the webiste of Chicago's own Adler Planetarium at <a href="http://www.adlerplanetarium.org/events/solar-eclipse-08-21-17/">http://www.adlerplanetarium.org/events/solar-eclipse-08-21-17/</a>.

A solar eclipse is a memory to last a lifetime! Taking these precautionary measures and following these important rules will ensure an enjoyable and safe experience for our students. Please call or email me if you have any questions.

Sincerely,

Dr. Lori Lopez Assistant Superintendent for Student Learning



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## **Eclipse Viewing**

Permission Form - Please see the enclosed letter for more information.

Please review the following Eclipse Viewing Guidelines and discuss their importance with your child:

Students will need to wear eclipse-safe glasses at <b>all</b> times when they are outside
during the eclipse. District 64 has purchased NASA-endorsed, eclipse-safe viewing
glasses for this purpose. If our glasses order is delayed due to the volume of orders
being processed, students will enjoy televised coverage of the event instead.
Students will not be permitted to look at the sun through unfiltered cameras,
telescopes, binoculars or other optical devices, with or without glasses.
Any student who is seen removing his/her glasses or acting in a way that distracts
from others' experience will be sent indoors.

We have reviewed the Eclipse Viewing Guidelines. I give my permission for my child to view the Solar Eclipse.

Teacher	
Student First Name	Student Last Name
Student Signature	
Parent Signature	