

APPENDIX C: Parent/Guardian Opt Out Forms

PARENT/GUARDIAN PASSIVE CONSENT FORM

Puberty: The Wonder Years 4th grade

Dear Parent/Guardian:

We are about to begin teaching *Puberty: The Wonder Years* in our class. As a parent/guardian, you have the right to excuse your child from sexual health education without penalty. To learn more about sexual health and HIV/AIDS education for East Lansing Public Schools, go to the ELPS website, click on PARENTS, then click on the HEALTH link.

- You may preview the curriculum and materials on the preview night or by contacting your student's school principal.
- You may view the lessons being taught if you wish. To do so, please contact your school's principal. The East Lansing Board of Education Visitation Policy will be followed
- If you decide that your child should not participate in some or all of the lessons, he or she will be excused without penalty. To do so, complete the **Exclusion Request below and return it to the school office.**

Exclusion Request

1. ***If you want your child to participate in the puberty lessons described on the attached list, you do not need to return this form.***

2. If you want your **child to be excused from some or all of the puberty lessons this year**, please:

_____ Initial here and complete this form

- Circle the lessons on the attached curriculum outline that you want your child to "opt out."

3. If you want your **child to be excused from all the puberty lessons this school year and all sex education each year hereafter**, please:

_____ initial here and complete this form Parent/Guardian Note: If you have excused your child this year and future years, you must notify your principal in writing if you want your child included in any sex education in the future

Date: _____

Student Name: _____

Address: _____

School Name: _____

Parent/Guardian Signature: _____