



LCS Reproductive Health Education and HIV/STI Prevention Parent Notification Form and Request to Excuse Child from Instruction

Dear LCS Parent or Guardian:

We are about to begin teaching our Reproductive Health and/or HIV/STI Unit in your child's health class. See attached curriculum outline. This program of instruction was approved by the Linden Community Schools Board of Education. As a parent/guardian, you have several rights:

- You must be notified prior to instruction on Reproductive Health and/or HIV/STI prevention.
- You may preview the curriculum and materials. To do so, please contact your child's building principal.
- You may view the lessons being taught if you wish. To do so, you must schedule your visit at least 48 hours prior to the class you want to observe. To schedule your lesson observation, please contact your child's building principal.
- You may excuse your child from this instruction without penalty. If you decide that your child should not participate in some or all the lessons, please complete the Exemption Request below and return it to the classroom teacher. By signing this exemption form, you understand that your child will have an alternate assignment that will be due in a reasonable time to the teacher after the HIV/STI and/or Reproductive Health instruction has been completed for the rest of the class.

Request to Excuse Child from Instruction

1. If you want your child to participate in the Reproductive Health Education and/or HIV/STI prevention 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 the sex education and/or HIV/STI prevention lessons **this year**:

<ul style="list-style-type: none">• Initial this box.• Circle the lessons on the attached curriculum outline from which your child will be exempted.• Complete this form.• Return the curriculum outline and this completed form to the classroom teacher.

3. If you want your child to be excused from all the reproductive health education lessons **this school year and each year hereafter**:

<ul style="list-style-type: none">• Initial this box.• Complete this form.• Return this completed form to the classroom teacher, with a copy to the building principal
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Student Name: _____ Parent/Guardian Name: _____

Parent/Guardian Email Address: _____ Parent/Guardian Phone: _____

Parent/Guardian Signature: _____ Date: _____