



ADRIAN PUBLIC SCHOOLS

Tradition of Opportunities
Future of Possibilities

4th GRADE ELEMENTARY PARENTAL HEALTH EDUCATION OPT-OUT FORM

I, _____ (parent/guardian) request that my child,
_____ be excused from participating in certain units of health or sex education instruction based on religious objections (moral, ethical, personal beliefs). I request that the District waive the class attendance of my child in a class or courses on:

4th Grade School Growth and Development Curriculum

Introduce:

- physical growth and development during puberty
- emotional growth and development
- healthy respectful relationships
- personal hygiene

Students will be separated by gender for 4th grade.

I understand that I am requesting the school to excuse my child from certain units of curriculum that are required by state law. I further understand that in lieu of receiving instruction in this unit of health education, my child may be required to receive alternative learning in health education that is sufficient to enable my child to meet state requirements for health education. I further understand that this opt-out exemption is only valid for the school year in which it is signed and subsequent waivers may be necessary.

Parent/Guardian Signature _____



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5th GRADE ELEMENTARY PARENTAL HEALTH EDUCATION OPT-OUT FORM

I, _____ (parent/guardian) request that my child,
_____ be excused from participating in certain
units of health or sex education instruction based on religious objections (moral, ethical, personal beliefs).

I request that the District waive the class attendance of my child in a class or courses on:

5th Grade School Growth and Development Curriculum

Review

- physical growth and development during puberty
- emotional growth and development
- healthy respectful relationships
- personal hygiene

Students will be separated by gender for 5th Grade

Introduce

- infectious diseases including HIV/AIDS and other sexually transmitted infections (STI's)—causes and prevention

I understand that I am requesting the school to excuse my child from certain units of curriculum that are required by state law. I further understand that in lieu of receiving instruction in this unit of health education, my child may be required to receive alternative learning in health education that is sufficient to enable my child to meet state requirements for health education. I further understand that this opt-out exemption is only valid for the school year in which it is signed and subsequent waivers may be necessary.

Parent/Guardian Signature _____