**Great Lakes School District Notification to Parents/Guardians**

for ***[insert name of sex education or HIV/STI prevention curriculum]***

Dear Parent or Guardian:

We are about to begin teaching ***[insert name of sex education or HIV/STI prevention curriculum]***in our [insert grade] class. This program of instruction was approved by the Great Lakes School District Board of Education. As a parent, you have several rights**:**

* You must be notified prior to instruction on sex education and/or HIV/STI prevention.
* You may preview the curriculum and materials. To do so, please contact:   
  **(Insert name and contact information for the person who will schedule previews.)**
* 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:   
  **(Insert name of person who will schedule lesson observations.)**
* 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 school office.

**Exemption Request**

1. If you want your child to participate in the sex 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**:

|  |  |
| --- | --- |
|  | * Initial this box. |
| * Draw a line through 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 person above. |

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

|  |  |
| --- | --- |
|  | * Initial this box. |
| * Complete this form. |
| * Return this completed form to the person above. |

Student Name:

Address:

Parent/Guardian Signature: Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent Notes:

* If you have excused your child this year and future years (option 3), you must notify the principal in writing if you want your child included in any sex education in the future.
* HIV/STI prevention lessons must be exempted annually.