



**ADRIAN PUBLIC SCHOOLS**

*Tradition of Opportunities*  
Future of Possibilities

## **7<sup>TH</sup> GRADE 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:

### **Seventh Grade Overview**

#### **Review**

- **changes of puberty**
- **functions of the male and female reproductive systems.**
- **refusal skills for risky behaviors**
- **abstinence from oral, anal, and vaginal sex as a responsible method of preventing unplanned pregnancy and sexually transmitted infections (STIs)**
- **healthy lifestyle choices**
- **personal hygiene**
- **legal consequences to poor decision-making**

#### **Introduce**

- **a more in depth discussion Sexual Transmitted Infections and their consequences**
- **abstinence to prevent pregnancy and STIs**
- **the use of condoms to prevent pregnancy and STIs.**

**Emphasis will be placed on teaching and practicing refusal skills and encouraging students to resist pressure to engage in risky behavior. Activities and discussions will focus on self-respect, and positively managing relationships.**

**Questions on the factual material presented in class will be answered by the teacher, but students will be encouraged to seek advice from parents/guardians, counselor, or other trusted adults with questions pertaining to sexuality and gender identity.**

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 \_\_\_\_\_

Student Name \_\_\_\_\_