



ADRIAN PUBLIC SCHOOLS

Tradition of Opportunities
Future of Possibilities

8TH 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:

Eighth Grade Review Overview

- 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 Sexual Transmitted Infections (STI).
- the use of condoms to prevent pregnancy and STIs.

Introduce

- fetal development and childbirth
- healthy dating relationships and setting limits
- recognizing dangerous environments.
- introductory information on a variety of birth control methods

Abstinence will be stressed as the best method of preventing unwanted pregnancies and STIs. Considerations (cost, side effects etc.) when choosing birth control will be discussed.

Students will review the laws pertaining to consequences of poor choices including parental responsibility, sexual harassment, and exposing others to health risks. The “Safe Delivery of Newborns Law” will be explained.

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 _____