

SAMPLE NOTIFICATION LETTER  
(Use School Letterhead)

Date

Dear Parent or Guardian,

We will soon begin a meaningful unit in health education entitled Family Life and Human Sexuality. Due to the sensitive nature of this instruction, as directed by the Maryland State Regulations (COMAR 13A.04.18.03), written parental permission is required prior to student participation in the unit. For your information a list of unit objectives is attached. These objectives are provided to assist you as you make a thoughtful decision about your child's participation.

As always, we support you as the primary sexuality educator for your child and value your ability to place this information in a moral context.

Any student who does not have parental permission to participate in the Family Life and Human Sexuality unit will be provided with our independent alternative, Health Education Enrichment unit or another mutually agreed upon activity by the student and family. The length of time spent on the alternate lessons will be the same number of days as the Family Life and Human Sexuality unit. More information will be sent home with students who are excused.

Thank you for your cooperation in returning the attached permission form promptly. If you have any questions please call the school or the Department of Education's Office of Health, Physical Education and Dance at (410) 313-7015.

Sincerely,

(Teacher)

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Please complete the following form and return it to your child's teacher.

<p>_____ <b>HAS permission</b> to participate in the (Child's Name)</p> <p>Family Life and Human Sexuality unit of the Health Education curriculum.</p> <p style="text-align: center;"><b>OR</b></p> <p>_____ <b>DOES NOT HAVE PERMISSION</b> to participate (Child's Name)</p> <p>in the Family Life and Human Sexuality unit of the Health Education curriculum.</p> <p>_____</p> <p>Parent/Guardian Signature <span style="float: right;">_____</span> Date</p>	
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