HEALTH EDUCATION CURRICULUM
FAMILY LIFE AND HUMAN SEXUALITY UNIT
PERMISSION FORM

NOTE: As directed by Maryland State Regulation (COMAR 13A.04.18.03), written parent permission is required prior to student participation in this unit. Please complete the form below and return it to your child's teacher.

My child _____ **has permission**

to participate in the Family Life and Human Sexuality

unit of the Health Education curriculum.

_____ _____

Parent/Guardian Signature Date

My child

_____ **DOES NOT**

HAVE permission to participate in the instruction

of Family Life and Human Sexuality. My child has

permission to work on the Health Education

Enrichment Unit.

_____ _____

Parent/Guardian Signature Date

Parent/Guardian Signature Date