

Dear Parent/Guardian:

The Maryland State Board of Education requires that each school system provide instruction about Acquired Immune Deficiency Syndrome (AIDS). In high schools, curricular topics related to HIV/AIDS are as follows:

Grades 9-12 Subject Areas:

Major content areas:

Health Education - (9)
 Biology (optional topic)
 Family and Consumer Science- (9-12)
 Psychology (optional topic)
 American Government
 (optional topic)

- Immunology and HIV infection
- Transmission, symptoms, and treatment of HIV infection
- Prevention of infection by HIV
- Issues related to discrimination against people with HIV infection
- Economic and legal impact of HIV/AIDS
- Community services for HIV infection

Education about HIV/AIDS may also be included in special school programs such as the DisAbility Awareness Day, Wellness Days, and plays such as "Secrets". HIV/AIDS Prevention Education will stress the importance of good health habits such as abstinence from sexual intercourse and refraining from the use of IV drugs and sharing needles. You as a parent/guardian may request that your child be excluded from the instruction. Please carefully consider your decision before requesting exclusion. HIV/AIDS education is critical in preventing the spread of HIV/AIDS. Classroom teachers have received training on how to provide accurate and age appropriate information on HIV/AIDS.

If you do elect to **request exclusion**, simply sign the statement below and return it to your child's school immediately.

Materials on HIV/AIDS that can be used in educating your child at home are available. To obtain copies, please contact the Office of Health, Physical Education, and Dance at (410) 313- 7015. The materials will be mailed to your home.

Should you have questions, please contact your child's teacher or the Office of Health, Physical Education, and Dance.

EXCLUSION FROM HIV/AIDS INSTRUCTION

(Return only if you DO NOT want your child to receive HIV/AIDS instruction)

I **DO NOT** want to have my child participate in the HIV/AIDS prevention instruction.

 Child's Name

 Parent/Guardian Signature

 School

 Date