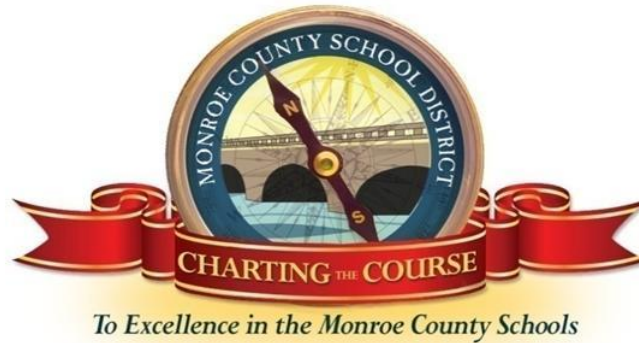


**THERESA AXFORD**  
Superintendent of Schools



**Members of the Board**

District # 3  
**MINDY CONN**  
Chairperson

District #4  
**JOHN DICK**  
Vice-Chairperson

District # 1  
**BOBBY HIGHSMITH**

District # 2  
**ANDY GRIFFITHS**

District # 5  
**DR. SUE WOLTANSKI**

## Comprehensive Health Opt Out

Parents/guardians are the primary sexuality educators for their child/ children and we are committed to partnering with you to provide supplementary resources to support you in this role.

Parents/ guardians have the right to opt your child out of any portion of the school district's comprehensive health education required under 1003.42 (2) (n) that relates to sex education instruction in acquired immune deficiency syndrome education or any instruction regarding sexuality. Parents may also review any of the materials being used for these lessons. Parents can contact the District office at (305-293-1400 x 53408 to make an appointment to review the content.

Please complete the opt-out form if you wish to opt your child out of any portion of the comprehensive health.

Grade Levels	Topic
Grades 6	Adolescent Development
Grades 7-8	Human Reproduction
Gr. 9-12	Sexual Development and Reproduction Abstinence STIs (Including: AIDS/HIV)

My child, \_\_\_\_\_, cannot participate in the class lessons on the following topic(s):

\_\_\_\_\_.

Parent's signature \_\_\_\_\_ Date: \_\_\_\_\_