

## Sample Opt-In Letter

### PARENT/GUARDIAN CONSENT FORM HUMAN SEXUALITY CURRICULUM

Course: \_\_\_\_\_ Teacher(s): \_\_\_\_\_

School: \_\_\_\_\_ Phone: \_\_\_\_\_

Dear Parent/Guardian:

As part of your child's education, he/she is enrolled in a course that includes human sexuality curriculum. Please read the attached syllabus carefully, select your option below, and sign, and return it to the school ON OR BEFORE \_\_\_\_\_ (date). If you would like to review the curriculum and talk with the teacher before signing this form, call or email the teacher immediately to set up a conference time. (Teacher's email / school phone).

NOTE: OPT-IN LETTERS work differently than opt-out letters you may have worked with before, in this or other school districts. The SCHOOL MUST HAVE A SIGNED FORM from EVERY STUDENT'S PARENTS/GUARIAN indicating whether the student DOES or DOES NOT have permission to participate in the human sexuality curriculum. Failure of a parent/guardian to return a signed form means the student WILL ATTEND STUDY HALL and WILL NOT RECIEVE human sexuality curriculum instruction.

**Please read and check on of the following options:**

Student's Name: \_\_\_\_\_

\_\_\_\_\_ I GRANT permission for my child to participate in the scheduled activities/discussions as described in the attached syllabus.

\_\_\_\_\_ I DENY permission for my child to participate in any of the scheduled activities/discussions as described above.

Parent/Guardian Signature: \_\_\_\_\_ Date \_\_\_\_\_

**Please Sign and Return this form to the school.**