

Student Opt-Out Form Comprehensive Sexual Health Education

The California Healthy Youth Act mandates that schools teach explicit sex-education programs at least once in middle school or junior high school beginning in grade 7. Parents may request that their students opt out of this mandate in favor of an alternative educational activity. By law, your child may not be subject to disciplinary action, academic penalty, or other sanction if you decide to opt them out of receiving sexual health education.

In order for your student to opt-out, parents must return this written request to your student's teacher or school administrator. Parents should make two copies of the completed Opt-Out Form. The notice should be sent to your student's teacher or school administrator via e-mail, fax, certified mail, or any other method whereby delivery can be confirmed. Tell your child to report to you if the school attempts to compel them to participate in sexual health instruction. In addition, ask your child's teacher when sexual health education will be covered and remind the teacher that you opted your child out.

Here is a partial list of the sex-ed requirements which students who are not opted-out will receive. The complete list of requirements can be found at www.cde.ca.gov/SchoolDirectory/. The sex-education program must:

- Teach students to affirmatively recognize that people have different sexual orientations.
- Provide discussion and examples of same-sex relationships.
- Teach students about gender, gender expression, gender identity and explore the harm of negative gender stereotypes.
- Teach students all twenty FDA approved contraceptive methods including the controversial method referred to as "emergency contraception."
- Teach students about "all legally available pregnancy outcomes including...abortion."
- Teach students about sexual harassment, sexual assault, adolescent relationship abuse.
- Teach students about intimate partner violence and sex trafficking.
- Additionally, unless opted-out, students may be required to complete explicit questionnaires or surveys relating to their personal sexual involvement and experience or intentions.

Comprehensive Sexual Health and HIV Prevention Education Withdrawal Form

By turning in this form, I am withholding my permission and therefore opting my student out of comprehensive sexual health and HIV prevention education. (Please print clearly)

My child's name is _____ Grade _____

Teacher's Name _____

Parent or Guardian Name _____

Parent or Guardian Signature _____ Date _____