

# MONTAGUE TOWNSHIP SCHOOL DISTRICT

475 Route 206 Montague, NJ 07827

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[www.montagueschool.org](http://www.montagueschool.org)



**James Andriac**

*Chief School Administrator*

**Danielle Conklin**

*Confidential District Office Secretary*

**Alicia Citro**

*Vice Principal*

**Melinda Bellis**

*Administrative Assistant to Business Administrator*

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## **Family Life Education OPT OUT Form**

DEAR PARENT/GUARDIAN:

I am writing to notify you of the upcoming Family Life Education health unit.

We acknowledge that parents/guardians are the primary educators for their child/children and we are committed to partnering with families as we educate students in the knowledge and skills they need in order to lead a healthy, active life.

As we agree that some topics may be uncomfortable for students, parents and guardians, we encourage families to have their students participate in these essential health topics. The school district's interpretation of the standards is to apply simple and clear definitions to terms. We want to remind parents/guardians that they have the option to excuse their child from portions of the Family Life instruction if it is in conflict with conscience, moral, or religious beliefs. If this is the case with your child, you should contact your child's Health Teacher to discuss the lessons he/she will be teaching your student.

All topics are taught in an age, grade, and developmentally appropriate manner. The Fifth Grade Curriculum will cover the following topics:

- Life Skills (personal growth and development) - injury prevention, sleep, nutrition, physical activity, life management skills/stress management/goal setting/self image, emotional health, hygiene/grooming, doctor visits, dental hygiene
- Adolescence (puberty, social and sexual health) - puberty, identify health care professionals, human reproduction, differentiate between sexual orientation and gender identity, demonstrate ways to promote dignity and respect for all, explain the importance of communication with trusted adults

Please only return this form to the school if you DO NOT want your child to participate in portions of the Family Life education unit.

If you have any questions, please contact Ms. Jacobs at [mjacobs@montagueschool.org](mailto:mjacobs@montagueschool.org) or Mr. Tanner at [stanner@montagueschool.org](mailto:stanner@montagueschool.org).

Thank you.

**PLEASE DETACH AND RETURN THE LOWER PORTION**

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## **Family Life Education OPT OUT Form**

- ☐ I do **NOT** give permission for my child to participate in portions of the Family Life education unit. I will discuss the specific lessons I object to with my child's health teacher. I understand students who are excused will be assigned to a separate classroom for the duration of those identified lessons and given an alternate assignment.

STUDENT'S NAME \_\_\_\_\_ HOME PHONE NUMBER \_\_\_\_\_

PARENT/GUARDIAN NAME \_\_\_\_\_ Phone Number(s) \_\_\_\_\_

PARENT/GUARDIAN NAME \_\_\_\_\_ Phone Number(s) \_\_\_\_\_

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*(Signature of Parent/Guardian)*

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*(Date)*