Parent Permission

Parent permission must be obtained before any survey data is collected or before any exposure to the Worth the Wait / Wellness & Sexual Health curriculum. The purpose of the permission slip is to make parents aware that a sex education program will be taught in their child’s school and allows them the opportunity to “opt-out” a child from the program if desired. It is recommended that an “active” permission slip be used. Sample templates are provided below, but each school should develop a form appropriate for their district. As stated on the permission slip, we suggest that parents be required to come to the school to “opt-out” their child. This gives school personnel the chance to discuss the program with parents and address their concerns. To better ensure permission slips reach their destination, schools may want to consider including them in the packet of papers sent home at the beginning of each year requiring parent signatures.

SAMPLE PARENT PERMISSION SLIP & “OPT-OUT” FORM

“Active” Parent Permission Slip Template:

Dear Parent/Guardian,

The ___________________________ Independent School District will soon begin teaching sexual health to all high school students. School administrators have chosen Scott & White’s abstinence curriculum called Worth the Wait / Wellness & Sexual Health. It is a two-week unit based on the medical and legal facts regarding teen sexual activity and stresses abstinence as the healthiest choice for teens. This curriculum does not address homosexuality or masturbation issues.

The curriculum will be available at each school campus for you to preview. You may call _________________________ at ______________________ if you have any questions. Once you are familiar with the program, if you prefer that your child not participate in this unit, please make an appointment to sign an ‘opt-out’ form.

I __________________________________ give my child __________________________________ permission to participate in the Worth the Wait / Wellness & Sexual Health Sex Education curriculum. Please sign form below. Thank you.

Sincerely,

School Staff    Parent/Guardian Signature    Date

If you DO NOT wish your child to participate in the Worth the Wait / Wellness & Sexual Health curriculum, please complete this form.

Following the review of the instructional materials on abstinence sex education, I am choosing to 'opt-out' my child, _________________________, from participating in the Worth the Wait / Wellness & Sexual Health curriculum. I understand that he/she will not be allowed to remain in the classroom while the curriculum is being taught, and that he/she will receive alternative lessons deemed appropriate by the school.

Child’s school: ___________________________________________________________ Grade__________________

Parent/Guardian Name (please print):__________________________________________

Signature: ___________________________    Date: __________________

Reason(s) for not participating:______________________________________________