



Boulder Valley School District

File: IGAE-E1

Adopted:

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**BOULDER VALLEY SCHOOL DISTRICT RE-2 HEALTH EDUCATION PROGRAM
PARENTAL EXCLUSION REQUEST FOR GRADES 7-8 AND 10**

Exclusion from Human Growth and Development/Human Sexuality Curriculum

Under Colorado State Statute, you may exclude your student from any portion or portions of the school district's human growth and development/human sexuality curriculum. Those portions are identified in italics in the document at the following site: [http://bvsd.org/curriculum/healthed/Documents/Secondary%20Health%20Education%20Exclusion%20Request%20\(English\).pdf](http://bvsd.org/curriculum/healthed/Documents/Secondary%20Health%20Education%20Exclusion%20Request%20(English).pdf). Please print this form and place a check in the space next to the human growth and development/human sexuality topic or topics from which you wish to exclude your child. Then sign and return this form and topics list to the school.

I wish to exclude _____ from the checked portions of the
Name of Child
human growth and development/human sexuality curriculum described in the BVSD Health Education Topics list for Grade ____.

Signature of Parent/Guardian

Date

Exclusion from Other Portions of the Health Curriculum

Under BVSD Board of Education policy, you may exclude your child from any other portion or portions of health instruction for your child's grade level, on the grounds that the instruction is contrary to your child's or your religious or closely held personal beliefs. Please be assured that Boulder Valley teachers receive specialized training in the appropriate presentation of health education topics. Therefore, we encourage parents to discuss their concerns with the health education teacher and/or district health education curriculum coordinator before submitting this form.

If you wish to exclude your child from any other portions of health instruction described in the current BVSD Health Education Curriculum (<http://bvsd.org/curriculum/curriculum/Pages/default.aspx>), please list those portions of the curriculum on the reverse side and include a brief explanation to allow the teacher to better formulate meaningful alternative assignments that accommodate your concerns.

(Please use reverse side)

I wish to exclude _____ from the following portion(s) of
Name of Child
the health curriculum described in the BVSD Health Education Topics list for Grade ____

Signature of Parent/Guardian: _____ Date: _____

Please return this signed form to your child's school before (Date) _____

End of File: IGAE-E