



**SNOHOMISH  
SCHOOL  
DISTRICT**

**OPT-OUT FORM  
HIV/AIDS Prevention and Sexual  
Health Instruction – Secondary**

The purpose of HIV/AIDS Prevention and sexual health instruction is to establish common learning goals across the district and to provide all students with medically accurate, developmentally appropriate, and bias free information to help them make decisions that positively impact their lifelong health and wellness. HIV/AIDS Prevention and sexual health lessons are aligned with state academic standards in Health.

A parent letter from your student’s Health teacher will provide you with specific information on what will be covered in your student’s class pertaining to HIV/AIDS Prevention and sexual health. Resources related to HIV/AIDS Prevention and sexual health lessons are available for parent review at Teaching and Learning Services in the district office and at the district’s presentation on HIV/AIDS Prevention. (Information on the presentation will be posted on the district website.) You may choose to excuse your student from participating in any or all of the lessons by completing this form and returning it to your student’s teacher three days prior to the planned instruction. See below.

Please note: Opt-out restrictions must be renewed each school year.

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After reviewing the Snohomish School District curricular resources, I would like to request that my child opt out of participating in the HIV/AIDS Prevention and sexual health lessons. I can find state resources to share with my child at [www.k12.wa.us/HIVSexualhealth/Resources.aspx](http://www.k12.wa.us/HIVSexualhealth/Resources.aspx). The school will provide an alternative assignment on a different subject matter and an alternative learning environment during the delivery of these lessons.

Please select:

- Opt out of ALL** HIV/AIDS Prevention and sexual health lessons
- Opt out** of some specific lessons (Please refer to parent letter from teacher and list specific lessons below.)

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Student Name \_\_\_\_\_ School \_\_\_\_\_  
Last, First

Parent Name \_\_\_\_\_  
Last, First

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_