



POOLVILLE INDEPENDENT SCHOOL DISTRICT

PO Box 96 · 16025 FM 920 · Poolville, Texas 76487 · Voice 817-594-4452 · Fax 817-594-2651

Parent Consent Form for Instruction Related to Prevention of Child Abuse, Family Violence, Dating Violence, and Sex Trafficking

BOARD OF TRUSTEES

- Colt Stewart President
Doug Gammill Vice President
Linda Harris Secretary
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Note to administrator: A District must obtain written consent from a student's parent before the student can be provided instruction related to child abuse, family violence, dating violence, and sex trafficking.

Parents must either submit the consent form below or provide their consent in writing to opt in their students for instruction related to the topic above.

Jan 16, 2024

Dear parent or guardian:

CENTRAL ADMINISTRATION

- Chris Pennington Superintendent
Jimmy Steen Director of Operations
Kristi Bryant Administrative Assistant
Megan Hall Business Manager
Tammie Braswell PEIMS Director
Mark Buckner Technology Director
Ashley Salyers BSN, RN
Traci Bryant, LVN Nurses

In accordance with the Texas Education Code and EHAA(LOCAL), the Poolville Independent School District provides instruction in compliance with State law and Board policy.

Your child is scheduled to receive instruction related to the prevention of child abuse on February 20, 2024.

If we do not receive your signed consent below or other form of written consent by February 5, 2024, your student will not be permitted to participate in the instruction and will be assigned an alternative instructional activity.

Poolville ISD recognizes the need for transparency regarding curriculum, particularly in content areas as sensitive as this one may be. For a description of the content of the District's instruction related to the prevention of child abuse, please visit the District's website at https://www.poolville.net/parentsstudents/sb9hb1525.

Poolville ISD also recognizes that parents and guardians may have specific questions about curriculum related to the upcoming instruction. If, after having reviewed resources available on our website, questions or concerns exist, please call your child's campus counselor for additional information.

We ask that you return the completed form below if you consent to this instruction for your child.

I, \_\_\_\_\_ (parent or guardian), give permission for my child, \_\_\_\_\_ (student's name), to be provided with instruction related to the prevention of child abuse, family violence, dating violence, and sex trafficking.

Parent or guardian's printed name

Parent or guardian's signature

JUNIOR HIGH

16025 FM 920
Poolville TX 76487
817.594.4539

- Jennifer Shifflett Principal
Lindsay Back Counselor

Date

Parent's / guardian's contact information

ELEMENTARY

15025 FM 920
Poolville TX 76487
817.599.3308

- Paige Bourland Principal
Cathy Pennington Counselor