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Exhibit A—Resolution of Board to Convene the District’s School Health Advisory Council (SHAC) to Recommend Curriculum Materials for Human Sexuality Instruction

WHEREAS, Section 28.004(e-1) (1) of the Texas Education Code requires the Board of Trustees to adopt a resolution convening the local school health advisory council (SHAC) for the purpose of making recommendations regarding curriculum materials for the school District’s human sexuality instruction;

NOW, THEREFORE, BE IT RESOLVED that the Board of Trustees of Ector County Independent School District hereby calls for the convening of the District SHAC to:

1. Hold at least two public meetings on the curriculum materials before adopting recommendations to present to the Board.
2. Recommend curriculum materials that comply with the instructional content requirements in law, are suitable for the subject and grade level for which the materials are intended, and are reviewed by academic experts in the subject and grade level for which the materials are intended.
3. Present the SHAC’s recommendations to the Board at a public meeting by *[insert timeframe]*.

Adopted this _____ (*date*) day of _____ (*month*), _____ (*year*), by the Board of Trustees.

Presiding officer’s signature: _____

Secretary’s signature: _____

Exhibit B—Parent Consent Form Regarding Human Sexuality Instruction

Note to administrator: A District must obtain written consent from a student's parent before the student can be provided human sexuality instruction. This request for parental consent must be provided to a parent not later than the 14th day before the date on which the human sexuality instruction begins for a student. This consent may not be included with any other parental notification or request for written parental consent.

_____ (date)

Dear parent or guardian:

In accordance with EHAA(LOCAL), the Ector County Independent School District provides human sexuality instruction in compliance with law and Board policy. As required by law, the District must obtain written consent before a student can be provided human sexuality instruction.

Your child is scheduled to receive human sexuality instruction on _____ (insert date).

If we do not receive your signed consent below by _____ (date requested for return, on or before the date of instruction), the student will not be permitted to participate in the human sexuality instruction and will be assigned an alternative instructional activity.

For a detailed description of the content of the District's human sexuality instruction, see the District's human sexuality instruction website at _____ (URL).

If you have any questions, please call _____ (e.g., campus principal).

Please return the completed form below if you consent to human sexuality instruction for your child.

I, _____ (parent), give permission for my child, _____ (student's name), to be provided with human sexuality instruction as described above.

Parent's name: _____

Parent's signature: _____

Date: _____

Parent's contact information: _____

For Office Use Only

[Must be received by the _____ (e.g., campus principal)]

Date received: _____

Received by: _____