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RUSD RIVERSIDE UNIFIED SCHOOL DISTRICT

Mahmoud Parent/Guardian Request for Student Opt-Out of Specific Instructional Content

This form provides parents/guardians with the option to request that their child be excused from specific instructional content when it may conflict with a parent or family's religious upbringing of their child pursuant to that parent or family's sincerely held religious beliefs. The request and district's response are dependent upon the specific religious beliefs and practices asserted, as well as the specific nature of the educational requirement or curricular feature at issue.

Each request will be reviewed by the District to determine the appropriate response based on the nature of the request and the instructional context. *Submitting this form does not automatically result in a student being excused from the identified content, and alternative arrangements will be considered on a case-by-case basis.*

Student Information

Student Name: _____ *Student ID#*: _____

Grade: _____ *School:* _____

Instructional Content for Opt-Out Request
Identify the specific required instructional material, including the type, name, and/or title of the material (e.g., title of storybook, assembly, lesson, or unit)

_____

_____

_____

_____

_____

_____

RIVERSIDE UNIFIED SCHOOL DISTRICT
3380 14th Street
Riverside, CA 92501
(951) 788-7135

BUSINESS SERVICES
6050 Industrial Avenue
Riverside, CA 92504
(951) 352-6729

CENTRAL REGISTRATION CENTER
5700 Arlington Avenue
Riverside, CA 92504
(951) 352-1200

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Specific Religious Beliefs
Explain the specific religious belief(s), custom(s), and/or practice(s) with which the specific instructional content substantially interferes.

Explanation of Conflict
Explain how the specific instructional content substantially interferes with the religious upbringing of your child in accordance with your sincerely held religious beliefs; including any grade level or individual student characteristics relevant to this opt-out request.

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Acknowledgments

- I understand that my child will not be subject to disciplinary action, academic penalty, or other sanction as a result of this opt-out request.
- I understand that the school will provide an alternative educational activity during the time my child is excused from the identified instructional content.

Parent/Guardian Name: _____

Parent/Guardian Signature: _____

Date: _____

Please submit your completed request form via email to mahmoudoptout@riversideunified.org .

For School Use
Request received: _____ *Request processed:* _____

Request was approved/denied & Date: _____

Reason for Denial: _____

_____

School Staff Signature _____