



Sexual Health & HIV/AIDS Education (K–12) Opt-out Form

Revised August 2026

This opt-out form may be completed and returned at any time.

Parents/guardians will also receive a separate notice from their child's teacher a few weeks before instruction begins. The notice will outline the age-appropriate lessons to be taught and provide parents/guardians with an additional opportunity to review the curriculum materials, ask questions, and determine whether they would like to opt their child out of one or more individual lessons or all Sexual Health & HIV/AIDS Education instruction.

Parents/guardians who would like to review the curriculum materials should visit our Sexual Health & HIV/AIDS Education page on our website at www.jpsk12.org/families/reproductive-health-opt-out, or if you have questions, contact:

Kelly Crum, Executive Director of School Climate & Curriculum, at 517-841-2145.

Only fill this portion out if you DO NOT want your student to participate in the Sexual Health & HIV/AIDS Education (K–12) instruction.

Please excuse my child from the classes in which the following subject(s) are presented or Discussed:

Choose one of the following:

- ☐ I **DO NOT** want my student to participate in this instruction for **this school year only**
- ☐ I **DO NOT** want my student to participate in this instruction for **all K-12 school years.**

Student Name

School

Current Grade

Parent/Guardian

Date