Holly Area Schools
Excellence in Action!

Reproductive Health Notification
Holly Area Schools

2020-2021 School year

Dear Parent/Guardian:

Holly Area Schools' Board of Education offers students the opportunity to participate in a Reproductive Health program. These programs are conducted as part of the Health, Parenting and Personal Living courses at the high school. The intent of these programs is to provide information to students so that they can make informed choices and to teach the kinds of skills that will help them reinforce those choices. It is our belief that the parent/family has the greatest influence on positive reproductive health decisions, and the programs offered provide opportunities for students to communicate with parents.

As your partners in educating young people about reproductive health, we can assist you in providing current information delivered to students in a safe, comfortable environment by competent, caring and committed professionals. In addition, parents will have access to resources to facilitate home discussions.

Young people today need to be armed with reliable information and must learn to practice the skills that will help them make informed choices to avoid the hazards of STD's, early pregnancy, and heartbreak. Using research-based instructional tools and your assistance, we can provide students with learning experiences to help them identify alternatives and make healthy choices.

The high school program contains information about developing healthy relationships, STD's/AIDS, and contraception. Instructional materials for the program will be housed at Holly High School. Please call Mrs. Miranda Barth, at 248-328-3200, to set up an appointment if you are interested in an on-site preview. Parents also have the right to opt their child out of one component of the program, the entire program, or all future Reproductive Health classes by returning the attached form to the school office.

Sincerely,

Peter T. LoFiego
Principal, Holly High School

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PARENTAL EXCLUSION REQUEST
HOLLY HIGH SCHOOL

2020-2021 School year

If you decide that your child should not participate in all, or part of the lessons; he or she will be excused without penalty. To do so, please complete the form below and return it to the school office.

IF YOU WANT YOUR CHILD TO PARTICIPATE IN THE LESSONS YOU DO NOT NEED TO RETURN THE FORM.

Please initial next to those lessons you wish to exclude your child from attending:

_____ Healthy Relationships

_____ Sexually Transmitted Diseases – including HIV & AIDS (Type, Prevention, Symptoms & Treatment)

_____ Contraception (Methods & Effectiveness)

If you wish to exclude your child from **all** Reproductive Health courses this year and all future years, please initial below.

_____ I wish to exclude my child from all Reproductive Health programs. **

** If you excuse your child from this program, you will need to notify the building principal, in writing, when you want your child included.

Student Name & ID: _____/ _____

Date of Birth: _____/ _____/ _____

Parent Name (please print): _____

Parent Signature: _____

Address: _____