

ORANGE UNIFIED SCHOOL DISTRICT

Education Center

1401 North Handy Street ● Orange, CA 92867-4334 714-628-4000 ● 714-628-4046 (Fax) www.orangeusd.org

Date: 2018-2019 School Year

To: Parents of Secondary Students

The Board of Education requires written notification to parents regarding classes in which human reproductive organs, functions, and processes are described, illustrated or discussed [(BP6142.1(a)]. This may occur in units on reproduction and communicable disease involving HIV/AIDS and other sexually transmitted diseases.

The California Healthy Youth Act requires that students in grades 7-12 receive comprehensive sexual health education and HIV prevention education at least once in middle school and once in high school. The Education Code defines comprehensive sexual health education as "education regarding human development and sexuality, including education on pregnancy, contraception, and sexually transmitted infections" (EC § 51931(b)) and HIV prevention education as "instruction on the nature of human immunodeficiency virus (HVI) and AIDS, methods of transmission, strategies to reduce the risk of HIV infection, and social and public health issues related to HIV and AIDS" (EC § 51931(d)).

Instruction must encourage students to communicate with parents, guardians or other trusted adults on the topics covered within the curriculum. Instruction must be medically accurate, age-appropriate and inclusive of all students. Trained health and science teachers will provide this instruction. If you have any questions or wish to preview the instructional materials, please contact the principal at your student's school site. You may request a copy of the California Healthy Youth Act (California Education Code Sections 51930-51939) by contacting the principal.

State law allows you to remove your student from comprehensive sexual health or HIV prevention education. If you do not want your student to participate in this portion of the instruction, please give written request to your student's principal.

I request that my student NOT participate in health or HIV prevention education curriculum			ensive sexual
Parent/Guardian Signature:		Date:	
Name of Child:	Grade:	Student	ID#