

**Concord School District Policy #634**  
**Health Education Opt-Out Procedure and Form**

Consistent with Department of Education requirements, health and physical education, including instruction about parts of the body, reproduction, and related topics, will be included in the instructional program.

Parents/guardians, or students over eighteen years of age, who do not want their child to participate in a particular unit of health or sex education instruction for religious reasons or religious objections, are allowed to have their child opt-out of such instruction.

Parents/guardians who wish to have their child opt-out of such instruction are required to complete the District opt-out form and state the particular unit of curriculum in which the student is not to participate. Any student who is exempted by request of the parent/guardian under this policy may be given an alternative assignment sufficient to meet state requirements for health education. The alternative assignment will be provided by the health or physical education teacher in conjunction with the Principal.

Parents/guardians who do not want their child to participate in a particular unit of health or physical education for religious reasons must complete a Health Education Opt-Out Form.

Opt-Out Forms are available from either the health education teacher or the Principal.

Opt-out requests must be submitted annually and are valid only for the school year in which they are submitted.

**Legal References:**

[20 U.S.C §1232h, \(c\)\(1\)\(C\), Protection of Pupil Rights](#)

[RSA 186:11, IX-c & IX-e Notice to Parents/Guardian Required](#)

[NH Code of Administrative Rules, Section Ed 306.40, Health Education Program](#)

[NH Code of Administrative Rules, Section Ed 306.41, Physical Education Program](#)

[RSA 186:11, IX-b, Health and Sex Education](#)

[Policy #650 Parental Request for Alternative Course Material](#)

### Health Education Opt-Out Form

I, \_\_\_\_\_ (parent/guardian) request that my child, \_\_\_\_\_ be excused from participating in certain units of health or sex education instruction or that I object to the course material described below.

I request that the District waive the class attendance of my child in a class or courses on:

- Comprehensive sex education, including in grades 6-12, instruction on the prevention, transmission, and spread of AIDS.
- Family life instruction, including in grades 6-12, instruction on the prevention, transmission and spread of AIDS.
- Instruction on diseases.
- Recognizing and avoiding sexual abuse.
- Instruction on donor programs for organ/tissue, blood donor and transplantation.

Please identify the grade level, class, and building: \_\_\_\_\_

Or I object to this course material being used for my child's education: (describe the specific course material in detail): \_\_\_\_\_

I understand that I am requesting the school to excuse my child from certain units of curriculum or specific course materials that are required by state law. I further understand that in lieu of receiving instruction in this unit of health education, my child may be required to receive alternative learning in health education that is sufficient to enable my child to meet state requirements for health education. I understand that that I may be responsible for the additional costs of the alternative course material. I further understand that this opt-out exemption is only valid for the school year in which it is signed, and subsequent waivers may be necessary.

See [RSA 186:11, IX-e](#) (as amended in 2017).

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Administrator Signature

Date Received \_\_\_\_\_

This form is exempt from disclosure under the Right-to-Know law, [RSA Chapter 91-A](#).  
[RSA 186:11, IX-e](#).