

Dear Parent/Guardian:

On _____ the school counseling department will be presenting a Family Life Education (FLE) Body Safety lesson in your child's classroom. In accordance with the *Code of Virginia*, the FLE program is designed to provide students with the knowledge and skills to make informed, responsible decisions related to growth and development; communication and relationships; and emotional and social health. Although the FLE program is highly compatible with existing curricula and serves to enrich the educational experiences of students, FLE content may be considered sensitive. Therefore, parents/guardians may choose to opt their child out of this FLE instruction. Students opted out will be provided with non-punitive activities during FLE instruction. Parents/guardians should review the FLE objectives (listed below) pertaining to their child's grade before making opt out decisions.

If you would like to review the lesson materials, they can be accessed at <https://pwcs.instructure.com/courses/342716> . If you determine your child should not be included in this specific FLE lesson, please either email _____ at _____ with the subject line "FLE opt out" or return the form below to your child's teacher no later than _____. Unless you indicate otherwise, your child will be included in this FLE lesson. You do not need to return the form if you wish for your child to participate in this specific instruction. If you have questions about this lesson, please contact _____.

Please note that this OPT OUT Form is only for the Body Safety lesson and for the specific grade level objective listed below.

We encourage you to discuss this topic with your child before the presentation, so that they can be prepared to receive the information and process their thoughts and feelings about it.

Virginia Family Life Education Body Safety Standards of Learning by Grade Level

Descriptive statements for these objectives can be found on the Virginia Department of Education FLE website:

<https://www.doe.virginia.gov/teaching-learning-assessment/instruction/family-life-education>

Additional information on FLE standards of learning can be found on the PWCS FLE Department webpage:

https://www.pwcs.edu/academics_programs/science_family_life_education/family_life_education/index

Kindergarten

- K.6** The student will develop an awareness of positive ways in which family members show love, affection, respect, and appreciation for each other.
- K.7** The student will realize that physical affection can be an expression of friendship, of celebration, or of a loving family.
- K.8** The student will recognize the elements of good (positive or healthy) and bad (negative or unhealthy) touches by others.
- K.9** The student will demonstrate how to say "no" to inappropriate approaches from family members, neighbors, strangers, and others.

First Grade

- 1.11** The student will realize that physical affection can be an expression of friendship, of celebration, or of a loving family.
- 1.12** The student will demonstrate strategies for responses to inappropriate approaches from family members, neighbors, strangers, and others.

Second Grade

2.6 The student will realize that physical affection can be an expression of friendship, of celebration, or of a loving family.

2.7 The student will advance in readiness to say "no" and to tell a trusted adult, such as a parent, teacher, minister, grandparent, or guardian, in private about inappropriate approaches from family members, neighbors, strangers, and others.

Third Grade

3.11 The student will demonstrate to others how to respond appropriately to good touches and how to handle inappropriate approaches from relatives, neighbors, strangers, and others.

Fourth Grade

4.7 The student will describe the factors surrounding child abuse and child neglect.

Fifth Grade

5.12 The student will recognize threatening or uncomfortable situations and how to react to them.

Prince William County Public Schools Family Life Education (FLE)

OPT-OUT REQUEST FORM

If you choose to opt your child out of the Body Safety school counseling lesson associated with the grade specific objective listed above, please complete this form, and return it to your child's teacher prior to _____. Please note: **You do not have to return this form unless you choose to opt your child out of this lesson.**

CHILD'S NAME: _____

GRADE: _____

TEACHER: _____

DATE: _____

PARENT SIGNATURE: _____