

**EXEMPTION FROM INSTRUCTION AND/OR EVENTS RELATED TO SEXUAL ORIENTATION, GENDER IDENTITY, AND GENDER EXPRESSION (SOGIE).**

We wish to thank the school for its commitment to recognizing parents as the first educators of their children.

As a parent, I wish to be given advance notice when my child is to be given any instruction in gender identity theory and/or sexual health, so that I may opt my child out.

I would like my child to be exempted without academic penalty from [Select any that apply];

- Instruction related to the elementary sexual health education curriculum.
- Instruction related to the secondary sexual health education curriculum.
- Instruction in gender identity theory in any class, even outside the sexual health class.
- Any school events that instruct in sexual health, or that gender is a non-binary construct. Such events include but are not limited to assemblies, readings, library events, walks, exhibitions, T-shirt days, school spirit days, health fairs, excursions etc.

During the exemption period, I would like my children to [select one only];

- Leave the classroom or event and remain in the school under staff supervision, I understand that my child's activities during exemption period will be at the discretion of the teacher or principal.
- Be released into my care or my approved designate.

\_\_\_\_\_  
Child's Last Name

\_\_\_\_\_  
Child's First Name

\_\_\_\_\_  
Parent/Legal Guardian Name (Print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Grade and Teacher

\_\_\_\_\_  
Date

A copy of this form should be provided to the classroom teacher(s) and the principal of the school.