

# Sample Notification Letter (on District or School Letterhead)

Dear Family:

Your teen will be involved in a program called NAME OF PROGRAM. The lessons teach ways to prevent HIV, other sexually transmitted diseases (STDs), and pregnancy. Students will learn how HIV and other STDs are transmitted and how teens can best protect themselves. Abstinence—choosing not to have sex—will be given as the best choice for students. But accurate information about other protection methods will also be provided. NAME OF PROGRAM is an evidence-based program.

Students will learn and practice ways to resist pressure to have sex. Communication and decision-making skills will be taught throughout the lessons.

The program includes DESCRIBE ANY HOMEWORK OR TAKE-HOME ACTIVITIES for parents and teens to help them talk about preventing HIV, other STDs and pregnancy. We hope you will do this assignment with your child, and share your knowledge and values. This homework is voluntary, and students will not share their parents' responses in class.

You are welcome to preview the program materials. Please contact

\_\_\_\_\_ at the school, and we will arrange a preview time and answer any questions you may have about the program.

If you DO NOT want your teen to participate in the program, you must complete the permission slip at the end of this letter and return it to school by

\_\_\_\_\_ so that we can arrange a different learning activity.  
(date) If we do not hear from you, we will assume you allow your teen to participate in the program.

Sincerely,

\_\_\_\_\_

I, \_\_\_\_\_,  
(parent/guardian)

DO NOT want my teen \_\_\_\_\_,  
(name)

to participate in NAME OF PROGRAM. I understand that my teen will be given another appropriate learning activity during this time.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Note:* You DO NOT need to return this form unless you DO NOT want your teen to participate in the lessons.