

# Human Sexuality and Responsibility

## Elementary School Permission Letter

### 4th Grade



Parent or Guardian,

In keeping with Austin ISD Board Policy EHAA, the Human Sexuality and Responsibility (HSR) curriculum will be taught this fall during your child's science class. The 5 lessons in grade 4 cover developmentally and age-appropriate information related to anatomy, puberty, boundaries and consent, and personal safety. This curriculum has been established to provide information and skill development for students so that they may reach their highest potential for physical, emotional, mental and social health.

If you haven't done so already, we invite you to preview the curriculum online at <https://www.austinisd.org/pe-health/health-education/hsr> (under the **K-HS Lessons** button). As the primary educator in your child's life, AISD believes that you are the most important source of information regarding human sexuality. The HSR curriculum is intended to support what students are learning at home, respecting your individual family values and teaching students to respect the family values of others that may differ from their own.

You have the right to decide if your child participates in these lessons. If you choose for your child to not participate in one or more of these lessons, there will be alternative lessons, focused on social and emotional learning skills, provided in a different location.

All information regarding the HSR policy, grade level lesson overviews, family resources, and more can be found on the HSR website: <https://www.austinisd.org/pe-health/health-education/hsr>. If you have any questions or concerns, please contact your child's teacher or campus principal.

***Please select one of the options below, sign and date, and return this form to your child's teacher.***

NOTE: If this form is not returned, your child will not be able to participate in any of the lessons.

☐ **My child will opt IN for all 5 of the Human Sexuality and Responsibility lessons.**  
(If selecting this option, you are done. Please skip to the bottom and sign and date.)

**I want my child to opt IN for only the following lessons:(check all that apply):**

- ☐ Lesson 1 My Body
- ☐ Lesson 2 Puberty
- ☐ Lesson 3 Puberty, Part 2
- ☐ Lesson 4 Boundaries and Consent
- ☐ Lesson 5 Personal Safety

☐ **My child will opt out of all the lessons listed above.**

\_\_\_\_\_  
Student Name

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

\_\_\_\_\_  
Date