

Pennsylvania Parent and Student Opt-Out Notice

Please take notice that my child is to be excused and exempted for the current school year from the following school instruction, programs, and/or activities. This opt-out applies to all checked boxes below:

- Instruction regarding prevention of human immunodeficiency virus (HIV) infection/acquired immunodeficiency syndrome (AIDS) and other life-threatening and communicable diseases** – Pursuant to 22 Pa. Code § 4.29, this serves as notice that my child is to be exempted from participation in instruction regarding prevention of human immunodeficiency virus (HIV) infection/acquired immunodeficiency syndrome (AIDS) and other life-threatening and communicable diseases.
- Dating violence education program** – Pursuant to 24 Pa. Stat. § 15-1553, this serves as notice that my child is to be exempted from participation in dating violence education program.
- Courses in the literature of religious writings** - Pursuant to 24 Pa. Stat. § 15-1515, this serves as notice that my child is to be exempted from participation in courses in the literature of religious writings.
- Course of instruction that involves dissecting, vivisectioning, incubating, capturing or otherwise harming or destroying animals or any parts; education projects or tests that involve harmful or destructive use of animals** – Pursuant to 24 Pa. Stat. § 15-1523, this serves as notice that my child is to be exempted from participation in the course of instruction that involves dissecting, vivisectioning, incubating, capturing or otherwise harming or destroying animals or any parts and any education project or test that involves harmful or destructive use of animals.
- Private information** – Pursuant to 20 U.S.C. § 1232h, absent my written consent, none of the following may be undertaken regarding my child. The administration of any survey, analysis or evaluation that reveals: (1) political affiliations or beliefs of my child or me, (2) mental or psychological problems of my child or his or her family, (3) sexual behavior or attitudes, (4) illegal, anti-social, self-incriminating, or demeaning behavior, (5) critical appraisals of other individuals with whom respondents have close family relationships, (6) legally recognized privileged or analogous relationships, such as those of lawyers, physicians, and ministers, (7) religious practices, affiliations, or beliefs of my child or me, or (8) income (other than required by law to determine eligibility for participation in a program or for receiving financial assistance under such program).
- Medical or dental examination or treatment** – Pursuant to 24 Pa. Stat. § 14-1419 and 28 Pa. Code § 23.45, this serves as notice that my child is to be exempted from regular or special medical examinations or treatments because such examinations or treatments are contrary to the religious beliefs of the parent or guardian of the child.
- Medical examination or treatment** – Pursuant to 24 Pa. Stat. § 14-1419 and 28 Pa. Code § 23.45, this serves as notice that medical examination or treatment of my child is to be conducted only in the presence of the parent or guardian.
- Dental examination or treatment** – Pursuant to 24 Pa. Stat. § 14-1419 and 28 Pa. Code § 23.45, this serves as notice that my child is to be exempted from dental examination or treatment.
- Scoliosis screening** – Pursuant to 28 Pa. Code § 23.10, please take notice that my child is to be exempted from scoliosis screening.
- Immunization** – Pursuant to 28 Pa. Code § 23.84, please take notice that my child is to be exempted from immunization on the following grounds:

Immunization may be detrimental to the health of the child. (**Note:** provide a written statement from a physician or the physician's designee that immunization may be detrimental to the health of the child.

The parent, guardian or emancipated child objects on religious grounds or on the basis of a strong moral or ethical conviction similar to a religious belief

Keep this signed, written notice on file in my child's cumulative folder. This notice supersedes all prior Opt-Out notices.

Child's Name _____ Grade Level _____ Date _____

Parent/Guardian's Name(s) _____

Parent/Guardian's Signature(s) _____

Parent/Guardian's Address _____

Daytime/Evening Phone Number(s) _____

School Name _____ School District _____

Received By (Print Name) _____

Received By (Signature) _____ Date Received _____

Instructions and Information on Using the Pennsylvania Parent and Student Opt-Out Notice

What to Do

THE OPT-OUT NOTICE MUST BE SUBMITTED EVERY YEAR

Note: These instructions are designed to assist you as a parent in completing the foregoing notice. These instructions should not be given to the school.

- 1) Make copies and share this Pennsylvania Parent and Student Opt-Out Notice with other parents.
- 2) This notice allows you to check each box that applies to your concerns. You can check all of the boxes, only one box, or a few boxes, depending on your particular beliefs.
- 3) Make two copies of the completed notice. Then, sign and date each copy in ink.
- 4) Send the Opt-Out Notice to the school Principal by Certified Mail, email, fax, or any other method whereby delivery can be confirmed. You do not need nor are you asking for “agreement” or “authorization.” You only need proof that you delivered the Opt-Out Notice to the school.
- 5) Keep one copy (with the proof of receipt) for your family and ask that the school keep a copy in your child’s school records (the cumulative file). Keep a signed copy for yourself.
- 6) Educate your children to report to you attempts to compel them to participate in classes or activities for which you have requested them to be opted-out.
- 7) Resubmit a copy of this Opt-Out Notice for each child when you enroll them for the next school year.