Appendix 2: Sex Education 'opt-out' form

Name of student:			
Year group:			
		to withdraw your child fro and Health Education pro	
1. Which sex education topics do you wish to withdraw your child from?			
2. Why do you wish to withdraw your child from these topics?			
3. How do you intend to provide information and guidance on this topic(s) at home?			
Once we have received this form, you will be invited into the academy to discuss these questions further with a member of our Senior Leadership Group and Curriculum for Life Lead Teacher. We can only confirm that your child will not take part in any lessons covering a topic classified as 'sex education' once this meeting has taken place.			
education' when they are	e within 3 terms of their 10 ramme to inform them of	back in to learning about 6 th birthday. If this is the cf topics they have missed. 20).	ase, the academy will
For further information, please see the academy Relationships, Sex and Health Education policy.			
Date of meeting:			
Meeting with:			
Following this meeting I	do / do not want to withdr	raw my child from sex edu	cation.
Printed name:		Relationship with child:	
Signed:		Date:	