



Instructions for Parents Regarding Opt-Out to Sex Education

- Fill out two copies for each student
- Keep one copy for each student for your records and turn the other copy in to the school your student attends
- Have school staff member sign and date the bottom of both the school and your copy
- Have Opt-Out Form placed in student's file



MICHIGAN PARENTAL SEX EDUCATION OPT-OUT FORM FOR THE _____ SCHOOL YEAR

I, _____, hereby exercise my rights as the parent/legal guardian to opt out my student _____, enrolled at _____ from the following curriculum or educational aids or both curriculum and educational aids:

Sex Education Advisory Board (SEAB) Compliant class or classes

- Any and all class or classes, instruction, lessons, or teaching recommended by the SEAB and approved by the district board of education.

OTHER Sex Education Not Approved by the district Board of Education and not in compliance with the SEAB class(es)

- Family planning drugs or devices including but not limited to:

Oral contraceptives;

Plan B;

Condoms;

IUD's;

Abortion (medications or procedures);

References to abortion clinics or apps that will help them find an abortion clinic or guide them through self-managed abortion.



- Human sexuality: Any and all instruction on gender ideology, the physiological (including endocrinological), psychological, and functions of reproductive health as it relates to human sexuality. This opt out includes, but is not limited to: gender identity, gender expression, gender assignment, sexual identities, sexual expression, sexual attraction, sexual orientation, gender fluidity, transitioning, and explicit sexual activity or behavior.

Therefore I/we opt out of:

Teaching, discussion, or lessons with explicit heterosexual sexual acts, fantasies, self-pleasure, or self-exploration;

Teaching, discussion, or lessons on Reproductive Health;

Teaching, discussion, or lessons on Sexually Transmitted Diseases;

Teaching, discussion, lessons, or events on Abortion;

Teaching, discussion, or lessons where pronouns are defined different than biology, or using his/her alternate pronouns as a meaning of redefining gender apart from biology;

Use of pronouns for my student that does not match the student's biological sex as listed in the enrollment documents;

Teaching, lessons, or discussions about transsexual healthcare, including hormone blockers, enhancers, and gender modification surgeries;

Teachers, staff, or administrators, displaying or distributing sexuality/gender paraphernalia like LGBTQ+ flags, or gay pride stickers;

Teachers, staff, or administrators displaying or distributing the gender bread person, gender unicorn, gender snowperson, or a similar gender teaching metaphor;

Exposure to books in elementary classroom libraries with storylines about young children transitioning, changing their identity, questioning their gender, participating in or witnessing explicit sexual activity;



Teaching, lessons, or discussions of any of the family planning or sexuality topics listed in this document utilizing the morning announcements by school staff, students or any outside organization or affiliate;

Teaching, lessons, or discussions in gender/sexuality social justice or gender/sexuality activism;

Given access to, instructions, discussion, or invitations to, a gender affirmation closet;

Teaching, lessons, or discussion encouraging students to participate in, accept, or understand cross-dressing or transsexual behavior;

Use, instruction, discussion, or teaching of gender neutral bathrooms or gender neutral locker rooms or any bathroom or locker room where persons of the opposite, physical, sex are permitted;

Teaching, lessons, planning, or discussions concerning a student in the creation, modification, or management of a gender support plan;

Reading assignments or access to books containing any sexuality or family planning themes listed in this document;

DEI or SEL sessions, teaching, discussions, or lessons that introduce trans and non-binary genders as protected classes of people;

Teaching, lessons, or discussions in the form of advertising or promotion for after school programs that discuss or teach gender identity/expression, sexual identity, sexual orientation, or any of the items included in this document;

All surveys, polls, or questionnaires that contain questions about any of the subjects listed in this document or aspects of the student's family life;

Reading selections or assignments that condone the violation of the laws of this state pertaining to sexual activity;



Displaying, directing to, or informing students of sex education websites or apps that allow students access to sex education information that is for all ages not just information that is age appropriate for them.

Access to books/materials in the classroom libraries with references to non-biological gender identities or storylines containing any type of non-heterosexual relationships, and/or explicit sexual activities of any kind;

Schoolwide activities that teach, discuss, or promote concepts about gender or sexual identities, gender or sexual expression, or other gender concepts such as LGBTQ+ Pride Week or Transsexual Week; and

School-provided or referred onsite or offsite counseling relating to reproductive health which is defined as “that state of an individual’s well-being which involves the reproductive system and its physiological, psychological, and endocrinological functions” - this would include gender transitioning.

Given that all curriculum or educational aids or both relating to sex education, family planning, human sexuality, and the emotional, physical, psychological, hygienic, economic, and social aspects of family life, is subject to Michigan laws that require transparency and prior notice to parents/legal guardians, I expect to receive notices about all future situations in which sex education is going to be approached with my student(s).

Finally, if a teacher, administrator, or faculty member witnesses my student being encouraged or directed to engage in any of the above opt-out activities, then the school is responsible to contact me immediately.

Parent and/or Legal Guardian
Printed Name

Date

Parent and/or Legal Guardian
Printed Name

Date

Received by : _____ Date : _____