

EAST WINDSOR REGIONAL SCHOOL DISTRICT  
Hightstown, New Jersey 08520

Family Life Education Exclusionary Form

The purpose of this form is to ensure compliance with the Health Education Board policy 2422 "Procedures will be established whereby any student whose parent or guardian presents to the school principal a signed statement that any part of the instruction in family life education is in conflict with his/her conscience, or sincerely held moral or religious beliefs, will be excused from that portion of any course where such instruction is given without penalty to course credit or graduation". (N.J.S.A. 18A:35-46 et seq.)

**ONLY RETURN SIGNED REQUEST IF YOU DO NOT WISH YOUR CHILD TO PARTICIPATE.**

Student's name \_\_\_\_\_ Date of Request \_\_\_\_\_

Grade \_\_\_\_\_

I request that my child be **excused** from participating in the following portion(s) of the family life education program because it is in conflict with my conscience or sincerely held moral or religious beliefs.

Topic (be specific as possible) \_\_\_\_\_

\_\_\_\_\_

Objectives (list all that apply) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

This form will be forwarded to the appropriate teacher.

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Principal's Signature