## Appendix 1: Sex Education in PSHE 'Opt-Out' Form

Name of student:				
Year group:				
Form tutor:				
of our whole school	Relationsh	ips, Sex and Health	to withdraw your child from Education provision. This do alth-related PSHE lessons.	
1. Which sex educati	on topics o	o you wish to with	ndraw your child from?	
2. Why do you wish t	to withdra	w your child from	these topics?	
2. Wily do you wisii	to withthat a	w your child from	triese topics:	
- H d	-1 1			
3. How do you inten	d to provid	e intormation and	guidance on this topic(s) at I	nome?
	your child v	•	d by the Lead for PSHE to discus ny lessons covering a topic class	•
they are within 3 term	s of their 16	th birthday. If this is	k in to learning about topics clas the case, 'catch-up' programment of for Education statutory guida	e is provided to inform them of
Date of discussion:				
Discussion with:				
Following this discus	sion, I DO	DO NOT want to v	withdraw my child from sex e	ducation.
Printed name:			Relationship with child:	
Signed:			Date:	