2019-20 Sexual Health Education Parent Notification Verification Form

After your school site has distributed Parent Notification Letters to parents/guardians of all students receiving the comprehensive sexual health education via one of methods described in Site Ops Circular 2027, and completed an autodialer message to these parents/guardians, Principals will fill out and sign this verification form, print and scan the form, and email it to Summer Hellewell at shellewell@sandi.net. Please email or call Summer at (619) 725-5583 if you have any questions about this form or the parent/guardian sexual health instruction notification process.

Read and submit this signed form to SHEP no later than Friday, September 13, 2019.
NOTE: Step 3 will occur closer to instruction, and by signing you understand your site’s responsibility for this additional parent notification.

1. Parent Notification Letters (letter templates in multiple languages are available here) need to be distributed to parents/guardians of all students receiving the comprehensive sexual health education via at least one of the following methods:
   a. Included in the enrollment packet distributed to students.
   b. Mailed to the homes of parents/guardians.
   c. Emailed to parents/guardians.
   d. Distributed to parents/guardians in another method commonly used by your site.

2. Arrange an autodialer message to parents/guardians of those students receiving the instruction to notify them of the letter being sent home.

3. Approximately two weeks prior to the instruction beginning, send a reminder notification to parents/guardians.

4. Fill out and submit the Sexual Health Education Parent Notification Verification Form verifying that parents have been notified by both letter and autodailer, and will be reminded at least two weeks prior to instruction. Scan the form and email it to Summer Hellewell at shellewell@sandi.net.

By signing, I verify that I have read all of the above steps to ensure that parents/guardians have been notified of San Diego Unified School District’s comprehensive sexual health instruction.

School Site: __________________________________________________________

Print Principal Name: __________________________________________________

Principal’s Signature: X ______________________________________________

Date Submitted: ______________________________________________________