

REQUEST FOR ALTERNATIVE DELIVERY

Student: _____ DOB: _____

School: _____ Grade: _____

This process is for parents/guardians who choose to teach at home specific parts of the curriculum related to sexuality and reproduction within the Physical and Health Education curriculum.

In consultation with the teacher/principal, please identify the content that will be taught at home.

Content	Completion Date

Once the above content has been taught, please submit this completed form to the school principal for placement in the student's cumulative file.

- ☐ I verify that the above listed curriculum components have all been taught at home.
- ☐ I feel confident that my child understands the content and can demonstrate their knowledge.
- ☐ Parents/Guardians have not submitted evidence of Alternative Delivery.

Parent/Guardian Signature Date

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The information on this form is collected under the authority of the School Act, Sections 13 and 79. The information provided will be used for educational purposes and, when required, may be provided to health services, social services or other support services as outlined in Section 79(2) of the School Act. The information on this form will be protected under the Freedom of Information and Protection of Privacy Act.