

Withdrawal from sex education withing RSHE

TO BE COMPLETED BY PARENTS/CARERS.			
<b>Name of child:</b>		<b>Class:</b>	
<b>Name of parent(s)/Carer(s)</b>		<b>Date:</b>	
<b>Reason for withdrawal from Sex Education.</b>			
<b>Additional information for the school to consider.</b>			
<b>Parent signature:</b>			

TO BE COMPLETED BY THE SCHOOL	
<b>Meeting Notes:</b>	
<b>Agreed action:</b>	
<b>Head Teacher Signature:</b>	

