

Parent form: withdrawal from sex education within PSHE

To be complete by parents/carers			
Name of child		class	
Name of parent/carer		date	

I/we would like to withdraw our child from the following lesson of the Jigsaw Programme that are non-statutory

Year 6 lesson on sexual intercourse, conception, consent and being interested in bodies by visiting professional from 'It Happens'	
Reasons for withdrawing from sex education within PSHE	
Any other information you would like the school to consider	
Parent/carer signature	

To be complete by the school	
Agreed actions from discussion with parent/carer	
Headmaster signature	