

REQUEST TO OPT OUT OF INSTRUCTIONAL AND/OR SUPPLEMENTAL MATERIALS (JRB-E(2))

This request must be sent to the Assistant Superintendent for Teaching and Learning, Dr. Ethel Lett, at ethel.lett@bcsdk12.net. A response will be provided within a reasonable time frame to the request to opt out.

Contact Information

Parent/Guardian Name: _____

Telephone: _____

Street Address: _____

E-mail Address: _____

Parent/Guardian of Student Name: _____

Enrolled at School: _____ In Grade: _____

Material Information

Title: _____

Author: _____

Publisher: _____

1. To what in the material do you object? (Please be specific.)

2. With what religious belief do you believe this instructional material conflict? Please describe in detail how this material will interfere with the religious development of their child or pose a very real threat of undermining the religious beliefs and practices a parent wishes to instill in the child.

3. Did you examine the material in its entirety? What parts?

4. In opting out of this material you, please confirm you understand that Student may not participate in related

instruction.

Signature

Date