**Puberty Education Permission Form**

**HCPSS Puberty Education Objectives**

The student will be able to:

* Identify expectations for a positive classroom environment for puberty education.
* Identify ways to communicate issues related to puberty with the family.
* Describe the role society plays in the perception of normal body image.
* Define “puberty” and describe how it affects the male and female body.
* Examine the effects of puberty on emotional and social growth.
* Examine the transition from behavior and attitudes of childhood to the behavior, attitudes, and responsibilities of the adolescent.

Please complete the form below and return it to your child’s teacher by Monday, 4/23/18.

--------------------------------------------------------------------------------------------

 **Puberty Education Unit Permission Form**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **HAS permission** to participate in the

(Child’s Name)

Puberty Education unit of the Health Education curriculum.

 **OR**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DOES **NOT HAVE PERMISSION** to

(Child’s Name)

participate in the Puberty Education unit of the Health Education curriculum.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Signature Date