

**REVERE PUBLIC SCHOOLS
PUBERTY AND HIV/AIDS UNITS
Fifth / Sixth Grade Parental Notification**

Dear Parent/Guardian,

February 19, 2015

Our children are facing many health risks. Research has shown that children exposed to health education in school are better equipped to handle the health challenges facing them. We are pleased to be offering a unit on puberty and on HIV/AIDS education to fifth and sixth grade students this year. The content of these units is in keeping with the HIV/AIDS education approved by the Revere School Committee.

The puberty class will be offered in gender separate groups: the 5th and 6th grade girls will be taught by their school nurse and or their Health Teacher. The 5th and 6th grade boys will be taught by Mr. Peter DiGiulio. The HIV/AIDS education will be taught to the entire class by health education teachers. The puberty class will cover information about the physical changes boys and girls undergo during puberty. Reproduction, including sexual intercourse, will be discussed. The HIV/AIDS unit will address the definition of HIV and AIDS, how germs are spread, how HIV is transmitted, the function of the immune system, and decision-making for healthy behavior.

Students are encouraged to discuss the information presented with their parents. Our program recognizes the parent as the primary teacher of children. So that you can be more informed about what your children will be taught, you are invited to the informational parent meeting listed below where you will experience the puberty lesson.

- **Wednesday, March 11, 2015, at 10:00 AM – 11:30 AM and again from 4:00 PM – 5:30 PM in the Learning Commons Media Lab at Revere High School.**

Please register in advance by calling Shaun Hart at (781) 286-8242 by **Tuesday, March 10th**. It is important to know how many will attend to arrange the proper room size and to assure custodian coverage. Please feel free to call if you are unable to attend, but have any questions about the puberty or HIV/AIDS lessons.

If you choose NOT to have your son/daughter participate in the puberty or HIV/AIDS lessons, **please sign the form below and return it to the school by Friday, March 13, 2015.**

Sincerely,



Christopher Malone
Assistant Superintendent of Schools

PUBERTY AND HIV/AIDS PARENT REQUEST FORM

I do **NOT** want my son/daughter, _____, to be in the puberty and HIV/AIDS classes. I understand that he/she will participate in an alternate activity.

Parent Signature: _____ Date: _____