

TO: Parents/Guardians

FROM: Office of Catholic Schools

SUBJECT: *Family Life and Child Safety Program*

DATE: January 1, 2019

As a way to support the Church's teaching on family life education, we are pleased to offer the RCL Benziger *Family Life* program to all students in our schools from kindergarten through grade eight during the weeks of January 14-25, 2019.

RCL Benziger *Family Life* helps foster personal growth, Catholic moral development, and respect for life. Centering on five themes of God's gifts - family, self, life, love, and community - the program at each grade level helps families to see, internalize, and act upon values for Catholic family living.

The Diocese of Gallup is engaged in an ongoing effort to create and maintain a safe environment for children and to protect children from all types of abuse, including sexual abuse. As part of this effort, the *Family Life* program contains a *Child Safety* program that we will also be presenting to our students at the same time.

As a parent, you have the right to choose whether your child participates in the *Child Safety* portion of the classes. You also have the right to choose if your 5th through 6th graders participate in the human reproduction portion of the classes as well. Please fill out the attached form, indicating your preference with regard to your child's participation in the *Child Safety* program for children in all grades, and the human reproduction classes for students in 5th through 6th grade. Return the completed form to your child's teacher no later than January 11, 2019.

Your school will have all materials for the *Family Life* and *Child Safety* Program available in the school office from January 7-14 for you to preview. Some schools may also hold a parent information meeting, so please consult the school calendar.

It is an honor and a privilege for our teachers to assist you in your role as the primary educators of your children. Thank you for sharing this blessing with us!

Sincerely,

Fr. Isaac Nnanna Ogba
Superintendent of Schools

Permission for my child to participate in the *Family Life* and *Child Safety* program:

- I give permission for my child to participate in the *Family Life* and *Child Safety* program presented at his/her school.
- I give permission for my child to participate in the *Family Life* and *Child Safety* program at his/her school, but prefer to teach the human reproduction materials at home, if applicable to my child's grade level (5th through 8th grades only).

Child's name _____ Grade _____

Parent/Guardian's name (printed): _____

Parent/Guardian's Signature: _____

Date: _____

Opt-out form for use with the *Child Safety* program:

I hereby ask that my child be excused from all classes and assignments related to the *Child Safety* program. I understand that my child will not be ostracized or penalized in any way because of this decision. I also understand that my child will have adult supervision and meaningful work to do during the time that he or she is out of the classroom while the *Child Safety* program is being taught or discussed.

Child's name _____ Grade _____

Parent/Guardian's name (printed): _____

Parent/Guardian's Signature: _____

Date: _____

If you choose to opt-out of the program, do you wish to come to the school office to get copies of the material to teach your child yourself? Yes _____ No _____