

Perth-Andover Middle School 20 Nissen Street Perth-Andover, N.B., E7H 3G1 273-4760 fax: 273-4763 Principal, Claudine Dionne Vice-Principal, Justin Tompkins

Dear Families:

We are pleased to inform you that we will be teaching the prescribed *Health Education Curriculum*, *Grade* 8. The curriculum consists of four strands shown on the attached page entitled Health Curriculum at a Glance: Summary of Learning Outcomes for Grades 6-8. For more information on the curriculum documents, please go to the following link: http://www.gnb.ca/0000/publications/curric/hcgr8.pdf.

Keeping children safe and healthy is of great importance to both parents and educators. Healthy students are better learners and are more likely to grow up to be healthy, happy adults. The intent of the curriculum is to assist and support parents in teaching their children knowledge and skills to promote health. All of the information is developmentally appropriate for children and builds on what they have learned in previous grades. The curriculum supports the development of skills to make healthy choices.

Families play an integral role in their child's education, and this is particularly important when the learning involves sexuality and sexual health. Schools address these topics to ensure that all learners have access to factual, accurate information about health and well-being and learn the skills to make safe and responsible decisions. This curriculum will not replace the role of parents/guardians in educating their children on sexuality and sexual health.

I encourage you to talk with your children about what they are learning in class and to contact me if you require further information. Your interest and support are greatly appreciated.

Sincerely,

Detach and return the form belo	w, if	you DO N	IOT wish to	have y	your child	participa	ite.
---------------------------------	-------	----------	-------------	--------	------------	-----------	------

part of it, then please complete the form below and re	eturn it to your child's teacher.
I do not wish my son/daughter (name) strand of the Grade 8 Health Curriculum. I request th	
Signature of Parent/Guardian	Telephone Number

If you DO NOT wish to have your child participate in the Growth and Development strand, or a particular