



**PUYALLUP SCHOOL DISTRICT**  
*A Tradition of Excellence*

*Jim Meyerhoff, Director of Health and Fitness, Athletics*

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**Request to Excuse Student  
From Sexual Health and/or HIV/AIDS  
Education**

**I have previewed the Puyallup School District's HIV/AIDS prevention and Human Growth and Development (Sexual Health) curriculum for my student's grade level.**

**I am requesting that my student be excused from participation in this activity.**

Name of Student:			
Student's School:		Grade:	
Today's Date:			

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**Signature of Parent/Legal Guardian**

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**Printed Name of Parent/Legal Guardian**

ORIGINAL to: Your Student's School

COPY to: Jim Meyerhoff, Director of Health and Fitness (address below)