



January 2020

Dear 4<sup>TH</sup> Grade Parent/Guardian:

Classroom instruction in the elementary family life unit in health will begin in February. This unit includes an emphasis on families, human growth and development. You have the option to decide if your child should participate in the family life unit. Please indicate your preference regarding your child's health unit on the form and return to your child's core teacher by Friday, January 24, 2020. There have been no changes to the elementary family life curriculum this year.

Copies of the family life units and the substitute units are available for parents to review at any of the school libraries or at the Tredyffrin, Easttown, or Paoli public libraries. Additionally, books, audiovisual resources, and teaching materials used in the elementary family life unit are available for your preview in the Large Group Room at Devon Elementary School, 400 S. Fairfield Road, Devon, PA., on **Tuesday, January 21, 2020 from 9:00-11:00 a.m. and 7:00-8:30 p.m.**

School districts in Pennsylvania are required by the State Board of Education to provide instruction about AIDS (Acquired Immune Deficiency Syndrome) at the elementary, middle, and senior high school levels. In Tredyffrin/Easttown School District, lessons at the fourth grade level in the family life unit include instruction about AIDS. These lessons are also available for parent review at the library locations noted above.

Thank you for your interest and cooperation.

Sincerely,

Dr. Oscar Torres, Jr.  
Director of State and Federal Programs/Curriculum Supervisor

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**PLEASE RETURN THIS PORTION TO YOUR CHILD'S CORE TEACHER BY FRIDAY, JANUARY 24, 2020.**

<p align="center"><b>ELEMENTARY HEALTH UNIT OPTIONS</b> <b>January 2020</b></p>
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Student's Name: \_\_\_\_\_

Grade: \_\_\_\_\_ Core Teacher: \_\_\_\_\_

Please check ONE of the following:

\_\_\_\_\_ I want my child to participate in the regular family life education unit.

\_\_\_\_\_ I do not want my child to participate in the regular family life unit but instead to participate in the substitute health unit. (Varies at each level.)

Parent Signature: \_\_\_\_\_

Date: \_\_\_\_\_