

Hermon Middle School
29 Billings Rd.
Hermon, ME 04401

Dear Parents/Guardians of 5th grade students,

Our class is about to study an important lesson on the early stages of puberty, which many fifth graders are beginning to experience.

This program helps boys and girls:

- Understand the physical and emotional changes they experience during puberty and acknowledge these changes as a normal part of growth and development.
- Learn the physiology of their bodies and correct terminology for parts of the reproductive system.
- Understand that personal hygiene is each individual's responsibility.

In addition, the program helps girls:

- Understand the menstrual cycle.
- Understand what to expect during a period.
- Learn how to manage periods while continuing with normal activities.

The program (*Always Changing* ®) is based on national research and consultation with school nurses, health educators, parents and medical professionals. It has been a trusted resource for over 25 years and has been taught to millions of students nationwide.

The class instruction will be Friday, May 25th 2018. Angie Scripture, RN (school nurse) will be instructing the girls and Jim Fratini (8th grade science teacher and former 5th grade teacher) will be instructing the boys.

Parental requests are required for a student to be released from instruction that infringes upon his or her beliefs. **In the case that select portions of the health curriculum material do not align with your beliefs, please return a signed note of release (below) prior to Tuesday, May 22nd 2018.** If the school does *not* receive a release letter prior to the scheduled health class, it will be noted that your child may attend.

If you wish to preview the transcript of the video or access more information you may do so on line at <https://www.pgschoolprograms.com/Parents>. (The boys will be watching the boys video and the girls will be watching the girls video.) If you have any questions, please do not hesitate to contact Angie Scripture, RN at 848-4048.

ONLY TO OPT OUT...

(To: Mrs. Scripture, RN)

I **do not** wish for my child to participate in the puberty unit offered by the school.

Signed (Parent/Guardian)_____

Name of Student_____