

Arizona Parent Opt-Out Notice

In relation to Arizona Revised Statute 1-601 and 1-602 whereas all parental rights are to a parent of a minor child without obstruction or interference from this state, any other political subdivision of this state, any other governmental entity or any other institution including: The right to direct the education of the minor child. The right to direct the upbringing of the minor child. The right to direct the moral or religious training of the minor child. The right to make health care decisions for the minor child, including rights pursuant to sections 15-873, 36-2271 and 36-2272 unless otherwise prohibited by law. Any attempt to encourage or coerce a minor child to withhold information from the child's parent shall be grounds for discipline of an employee of this state, any political subdivision of this state or any other government entity, except for law enforcement personnel. This opt-out applies to all checked boxes below:

Mental Health Screening – Pursuant to 20 U.S.C. 1232 (h) and ARS 15-104 (A), absent my written consent, none of the following may be undertaken regarding my child: the administration of any survey, analysis or evaluation that reveals (1) political affiliations or beliefs of my child or me, (2) mental or psychological problems of my child or his or her family, (3) sexual behavior or attitudes, (4) illegal, anti-social, self-incriminating, or demeaning behavior, (5) critical appraisals of other individuals with whom respondents have close family relationships, (6) legally recognized privileged or analogous relationships, such as those of lawyers, physicians, and ministers, (7) religious practices, affiliations, or beliefs of my child or me, or (8) income (other than that required by law to determine eligibility for participation in a program or for receiving financial assistance under such program.) Any/all surveys, questionnaires to not be given including all verbal surveys, social & emotional surveys, mental health surveys, 3rd party vendor surveys, website surveys on any/all supplemental resources and/or outside organizations including but not limited to Boys Town and Bloom365.

Miscellaneous - Because I believe the learning material to be harmful to my child pursuant to ARS 15-102, I request my child be withdrawn from the activity (ies), class(es) or program(s) as follows:

Mask Mandates – Pursuant to ARS 15-102(A)(3), we believe restricting oxygen from my child is harmful to my child because of the moral obligation to allow my child to breathe oxygen for my child's health and wellbeing. My child will not wear a mask on school property.

Covid-19 Vaccine – No Covid19 vaccine will be given to my child on school property, no school employee will discuss with, question or coerce my child about the Covid19 vaccine during class or at any time on school property, no Covid 19 test will be given to my child by the school or on school property.

Sex Education – Pursuant to ARS 15-102 and R7-2-303 (A)(1)(a)(i), this shall serve as a written notice that my child is to be exempted from the sex education curriculum provided by the school district.

AIDS Instruction – Pursuant to ARS 15-102 and 15-716 this shall serve as written notice that my child will be exempted from instruction on acquired immune deficiency syndrome.

Immunizations – Pursuant to ARS 15-102 and 15-873 this shall serve as written notice of my child's exemption from the immunization(s) as follows: _____

If any situation happens at school with my child, the front office will notify _____ before speaking and/or asking questions with _____.

Keep this signed notice on file in my child's cumulative file

Child's Name _____ Grade Level _____ Date _____

Parent/Guardian's Name(s) _____

Parent/Guardian's Address _____

Parent/Guardian's Signature(s) _____

Daytime/Evening Phone Number(s) _____

School Name _____ School District _____

Received by (Print name) _____

Received by (Signature) _____ Date Received _____