

PINELLAS COUNTY SCHOOLS  
**EIGHTH GRADE HEALTH EDUCATION WAIVER**

**Students with eight or more course opportunities CANNOT waive health education.**

**Health Education or Personal Development have been required courses for middle school students since 1985. Beginning in 1991, students in the Grade 8 Gifted elective (Advanced Academics) could exempt this requirement with written parent/guardian permission. Another option for gifted students is for them to complete Health Education as a virtual online course.**

Health education in the eighth grade begins with lessons in mental health that include topics on: personal growth, coping with stress, developing good self-image, communication skills, problem-solving skills, and adolescent depression and suicide prevention. The human sexuality unit encourages abstinence through lessons on menstruation, fertilization, fetal development, appropriate sexual behavior, the consequences of teenage pregnancy, causes and preventions of birth defects and sexually transmitted diseases including AIDS. Other units cover topics on substance abuse that focus on alcohol abuse prevention. Lessons include the effects of alcohol on the body, laws related to alcohol, influences of media and peers, and effective decision-making. Personal health and nutrition lessons reinforce the concepts of good grooming, healthy eating, and good dental health. First aid lessons allow students to develop judgment and skills in emergency situations.

**Parents/guardians who wish to enroll their child in the Grade 8 Gifted elective (Advanced Academics) must read and sign this form.**

I, \_\_\_\_\_, the parent or guardian of

\_\_\_\_\_, wish to enroll my child in the Grade 8 Gifted elective (Advanced Academics). I understand that the health education concepts and skills identified above will not be part of my child's school experience in the eighth grade. I choose to assume responsibility for these aspects of my child's education through our home.

\_\_\_\_\_  
School

\_\_\_\_\_  
Student Name

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

\_\_\_\_\_  
School Official

\_\_\_\_\_  
Date

**This form must be returned to the health education office, Administration Building.**

The original of this form is to be placed in the student's cum folder. Send a copy to the Health Education Office, Administration Building.