

Date:

Per Policy IMBB- I, _____ am notifying
_____ school, that effectively immediately I am opting out my
student _____ from any and all Social/Emotional Learning
programs/curriculum and any and all school counseling curriculum and school
counseling services. _____ school is not authorized
to teach my child anything on Social/Emotional Learning programs/curriculum
and any and all school counseling curriculum I haven't been given access to and I
am opting my student out of all school counseling services. Furthermore, I
hereby revoke all previous permissions and authorizations.

Signed,

*(N.B. You could add "You will be held liable for any harm that comes to my child,
or my family as a result of your failure to comply with my lawful request."
Also, these letters must be updated annually)*