



**Manhattan Beach  
Unified School District**

April 27, 2017

Dear Parents of Fifth Grade Students:

As part of the Family Life unit of the Health Education Program, students in each school will see two videos and participate in discussions to help the boys and girls in the fifth grade understand the physiological changes, which occur in their bodies and the impact of these changes as they enter puberty.

As outlined in our Board approved guidelines, we will show the videos Just Around the Corner for Boys and Just Around the Corner for Girls to fifth grade boys and girls in separate groups.

Parents are invited to preview these videos prior to the time they will be shown to children. Board approved guidelines require parent permission for pupil participation in this program. If, for any reason, you do not want your child to see the videos, please notify the teacher by indicating your preference on the form below.

**Videos can be previewed online:** <http://tinyurl.com/j2z4mmm>

Note: this link will expire on May 5, 2017

**The form below must be returned to your child's teacher by May 5, 2017 indicating each parent's preference in regard to the Family Life program. Students not participating in the Family Life program will be provided with alternative curriculum.**

**FIFTH GRADE VIDEO (OPTIONAL) PREVIEW FOR PARENTS**

**Tuesday, May 2nd at 8:15 am**

***Manhattan Beach District Office, 325 S. Peck Avenue, Manhattan Beach***

**We hope you will set aside time for previewing these materials with us.**

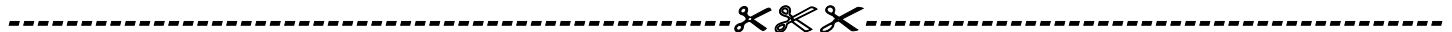
**Videos will then be shown to students with parental permission at school sites after the above dates and not prior to May 5, 2017.**

Parents are encouraged to discuss the videos and related matters with their children. If you have further questions regarding the Family Life unit, please contact your child's teacher, your school principal, or feel free to contact me.

Sincerely,

Brett Geithman, Ed.D.  
Assistant Superintendent of Educational Services

*(detach here)*



Student's Name: \_\_\_\_\_ Student's Teacher: \_\_\_\_\_

\_\_\_\_\_ I would like my child to view the videos shown in the Family Life Program.

\_\_\_\_\_ I do not want my child to participate in the Family Life Program.

\_\_\_\_\_ Date

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

**PLEASE RETURN TO YOUR CHILD'S TEACHER BY MAY 5<sup>th</sup>**

*(Permission slip is required for student viewing of Family Life videos.)*