

	<b>Ancaster Meadow Elementary School</b>	
	93 KITTY MURRAY LANE ANCASTER, ON L9K 1S3 TEL: 905.304-3255 FAX: 905.304.3775	EMAIL: <a href="mailto:meadow@hwdsb.on.ca">meadow@hwdsb.on.ca</a> <a href="http://www.hwdsb.on.ca/ancastermeadow">www.hwdsb.on.ca/ancastermeadow</a> PRINCIPAL: Mr. S. Goodacre VICE-PRINCIPAL: Mr. C. Blunsdon

March 8, 2018.

Dear Parent/Guardian:

This letter is to inform you that your child will begin a unit on Human Development and Sexual Health starting the week of March 26th.

The following expectations of the Ontario Curriculum will be covered in the Grade 5 program.

**By the end of Grade 5, students will:**

- identify the parts of the reproductive system, and describe how the body changes during puberty;
- describe the processes of menstruation and spermatogenesis, and explain how these processes relate to reproduction and overall development;
- describe emotional and interpersonal stresses related to puberty, and identify strategies that they can apply to manage stress, build resilience, and enhance their mental health and emotional well-being.

The following resources will be used to assist in the delivery of this unit:

- OPHEA resource document

As the Ontario Curriculum indicates, “Parents are the primary educators of their children with respect to learning about values, appropriate behaviour, and ethnocultural, spiritual, and personal beliefs and traditions, and they are their children’s first role models. It is therefore important for schools and parents to work together to ensure that home and school provide a mutually supportive framework for young people’s education” (page 13). This unit offers you, as the most significant influence of your child’s values and behaviours, the chance to discuss the classroom lessons and consider them in light of your own family beliefs.

Parents are invited to review the resources for this unit in the attached Parent Resource Guide in the main office prior to the unit starting.

Sincerely,

\_\_\_\_\_

Principal’s Signature

\_\_\_\_\_

Teacher’s name and signature

Please PRINT, complete and return this tear-off slip to your son/daughter’s classroom teacher by Friday, March 23rd.

Name of Child: \_\_\_\_\_

I have received the letter and am aware that my child will be participating in Human Development and Sexual Health lessons during March and April.

\_\_\_\_\_

Parent Signature

\_\_\_\_\_

Date