

October 31, 2016

Dear Parent / Guardians,

As part of our Great Body Shop Curriculum your **7th** grade students will be covering the Cycle of Life Unit towards the middle or end of November for approximately 1-2 weeks. Under these state standards the following topics will be discussed:

- **Stages of Life - Fetal Development - Stages of Pregnancy**
- **What is Happening to Me? - Physiological changes that occur during puberty**
- **Anatomy of Male and Female Reproductive System**
- **It's A Matter of Hygiene - Taking Care of Myself During Puberty**

After the Cycle of Life Unit, they will also be learning about Suicide Prevention and Intervention through a state program called "SOS". Helping them to recognize signs of depression, and suicidality in themselves or their peers and encourages help seeking behaviors using the acronym called **ACT Acknowledge, Care, Tell.**

The focus of this work relates to giving our students the tools to make confident healthy decisions during one of the most difficult times in life. The purpose of this letter is to inform you that this work will begin in the next week or two. You may find that your child starts asking questions about the topic at home, or you might want to take the opportunity to talk to your child about issues such as those including puberty, boyfriends and girlfriends and the emotional changes which they might experience, feelings of sadness, withdrawal, importance of communication and getting help and reminding them you are there for support.

If you have any questions about the content of the program or resources used please do not hesitate in contacting me at school. The Great Body Shop or SOS basic curriculum outline is also available for you to look at just click on the links below www.thegreatbodyshop.net and <https://mentalhealthscreening.org/programs/sos-signs-of-suicide>

Please return the bottom of the notice to your student's **teacher only** if you wish for your student **NOT** to participate in this unit/s **Please return by November 11th, 2016**

Tara Noyes
Wellness Department Chair 6-12
781-352-3856

If you choose to opt out of either options please check below

I have read the above letter and I opt for my child **NOT** to participate in the **Cycle of Life Unit.** _____

I have read the above letter and I opt for my child **NOT** to participate in the **Suicide Prevention** _____

Child's Name _____

Parent's Signature _____

Teacher: (Please circle your child's teacher) **Ms. Arouca** **Mr. Dupuis** **Mr. Nimblett**