



**Family Life and Human Sexuality (FLHS)  
and Disease Prevention And Control (DPC) Worksheet  
Annual Report—Middle School**

Department of Secondary Curriculum and Districtwide Programs  
MONTGOMERY COUNTY PUBLIC SCHOOLS  
Rockville, Maryland 20850

**MCPS Form 345-30B  
August 2015  
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**INSTRUCTIONS:** Maryland State Board of Education Regulation (COMAR 13A. 04.18) requires that all public schools provide instruction to students on Family Life and Human Sexuality and HIV/AIDS Prevention Education. This worksheet is to be used to complete the annual report required by state mandate. For more information, please see MCPS Regulation IGP-RA.

Please return the completed worksheet to the Supervisor, Pre-K–12, Health and Physical Education, CESC, Room 253

School \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_ School Year \_\_\_\_\_  
Respondent \_\_\_\_\_ Title \_\_\_\_\_

**PART I: Instruction information for Family Life and Human Sexuality Unit—Grades 7–8 Comprehensive Health Education**

	Average Instruction Time In Hours Per Marking Period (Total classroom hours for FLHS instruction)	# of Students Opt-In (Receiving Instruction)	# of Students Not Opt-In (Receiving Alternative Unit)
Grade 7 Family Life and Human Sexuality Unit			
Grade 8 Family Life and Human Sexuality Unit			

Type(s) of alternative instruction for students who were excused from the FLHS unit:

- MCPS Grade 7 Alternative Lessons     MCPS Grade 8 Alternative Unit A

Parents/guardians were informed of their right to have their child Not Opt-In (excused) from this instruction by:

- Letter including FLHS standard, performance indicators, and parent permission form     Newsletter  
 Other (specify) \_\_\_\_\_

**MATERIALS**

Date(s) of the Parent Information Meeting and review of FLHS/DPC instructional materials: \_\_\_\_/\_\_\_\_/\_\_\_\_, \_\_\_\_/\_\_\_\_/\_\_\_\_

Parents/guardians were notified about the Parent Information Meeting to review FLHS/DPC instructional materials via:

- Newsletter     Memo     Other (specify) \_\_\_\_\_

**COMMUNITY INVOLVEMENT**

Each school is required to have a local school-community planning group. An administrator, parent(s)/guardian(s), and teacher(s) must be included in each school's planning group. Please list names of the members of your local school-community planning group for Family Life and Human Sexuality and Disease Prevention and Control. Indicate whether each person is a parent/guardian, teacher, media specialist, or administrator.

**MEETING PARTICIPANTS**

**Date of Meeting** \_\_\_\_/\_\_\_\_/\_\_\_\_

	Required Participants/Name	Other Participants/Name/Title
Administrator	_____	Student Representative(s) _____
Parent(s)/Guardians	_____ _____	_____ _____
Teacher(s)	_____ _____ _____	_____ _____ _____

