

Dear HSFI Parents and Guardians,

Health education that teaches responsible decision-making enables students to be more productive in school and in life. As a complement to the health education that students receive, the NYC Department of Education's HIV/AIDS education program requires a Condom Availability Program (CAP) at public high schools that can help reinforce students' decision-making in and out of the health education classroom.

According to state law, through CAP, students in grades 9-12 may request free condoms, medically accurate health information, and health referrals from trained school staff. As a parent, guardian, or custodian, you may ask the school not to provide your adolescent with condoms. Per Public Health Law § 2504, you are not permitted to make this request if your child 1) is 18 years of age or older; 2) has been or is currently married; 3) is a parent, and/or 4) is entitled under law to give consent for themselves.

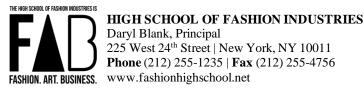
To request that your child not receive condoms through CAP, please complete the form on page 2.

If you change your mind and decide that your child can request free condoms, you can send me an email at any time during the school year. CAP-trained staff members are committed to ensuring the confidentiality of all students, including those who do not participate in the program.

We encourage you to have conversations about sexual health and other health topics at home to best support your young adult in making positive health choices. Thank you for working together with us to help New York City students feel valued, healthy, and able to thrive.

Sincerely,

Daryl Blank, Principal The High School of Fashion Industries



Sign and return only if you **DO NOT** want your daughter/son to participate in the Condom Availability component of the HIV/AIDS Prevention Program. It must be noted that this option shall not apply to students who are 18 years or older, who are or who have been married, who are parents, or who are entitled under law to give consent for themselves. If you have more than one child enrolled in the school, please complete a separate form for each child.

My son/daughter _____

Print full name of student

who is in grade 9 10 11 12 at **Fashion Industries High School**, **IS NOT** to participate in the condom availability component of the program.

My daughter's/son's Public School Identification Number is

(If you do not know your #, the school will enter it for you.)

Printed name of parent/guardian/custodian

Signature of parent/guardian/custodian

Date

If your daughter/son is not to participate, return this portion to her/his **HIGH SCHOOL PRINCIPAL** in an envelope marked "*CONFIDENTIAL*."