MOE SEXUALITY EDUCATION IN SCHOOLS PARENT OPT-OUT FORM

To: Ms Poh Hwee Thing (Principal), Yio Chu Kang Primary School

Dear Principal
1. I would like to withdraw my child,
of, from Sexuality Education lessons for 2025.
2. My reason(s) for my decision to opt my child out of the programme:
☐ Religious reasons
☐ My child / ward is too young.
$\hfill \square$ I would like to personally educate my child / ward on sexuality matters.
$\hfill \square$ I do not think it is important for my child / ward to attend Sexuality Education.
☐ I have previously taught my child / ward the topics in the Sexuality Education lessons for this year.
$\ \square$ I am not comfortable with the topics covered in the Sexuality Education lessons for this year.
□ Others:
Thank you
Parent's Name & Signature:
Parent's Email address:
Parent's Contact No. (mobile)
Child's Full Name:
Child's Class:
Date: