Parents Opt-Out Form

This form is applicable only if the parents wish to opt their daughter out of Sexuality Education lessons in 2023.

Date:	·		
Parei	nt's name:		
Parent of (daughter's name):			
Mrs (Chan-Tey Kah Hwee		
Ceda	r Girls' Secondary School		
Dear	Principal		
	OPT-OUT	Γ OF SEXUALITY EDUCATION LE	SSONS
1.	I would like to withdraw	my daughter,(full name	, of of daughter)
	, from Sex (class)	cuality Education (SEd) lessons in 2	2023.
2.	The reason(s) for my decision to opt my daughter out of the SEd lessons is/are:		
	□ Religious reasor	ns	
	☐ My daughter is to	oo young.	
	☐ I would like to pe	☐ I would like to personally educate my daughter on sexuality matters.	
	☐ I do not think it is	s important for my daughter to atter	d SEd lessons.
	I have previously	y taught my daughter the topics in t	he SEd lessons for this year.
	☐ I am not comfort	able with the topics covered in the	SEd lessons for this year.
	□ Others (please s	specify):	
3.	Thank you.		
Pa	arent's name & signature	Contact number (mobile)	Email address (optional)