[Parent Opt-out Form – This section is applicable only for parents who wish to opt their child out of the MOE Sexuality Education programme for 2024.]

MOE SEXUALITY EDUCATION IN SCHOOLS
PARENT OPT-OUT FORM

Date: \_\_\_\_\_

To:	Mrs	s Leong, Principal of CHIJ St Theresa's Convent
Dear	Princi	ipal
1.	l wo	ould like to withdraw my child,, of
		, from Sexuality Education lessons for 2024. (class of child)
2.	My re	eason(s) for my decision to opt my child out of the programme:
		Religious reasons
		My child is too young.
		I would like to personally educate my child on sexuality matters.
		I do not think it is important for my child to attend Sexuality Education.
		I have previously taught my child the topics in the Sexuality Education lessons for
		this year.
		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:		
Parei	nt's Co	ontact No. (mobile)
Child's Full Name:		
Child's Class:		