

[Parent Opt-out Form – This section is applicable only if parents wish to opt their child out of Sexuality Education.]

Date: _____

Parent's Name: _____

Parent of (Child's name): _____

Ms Chan Wan Siong

Damai Secondary School

Dear Principal

SEXUALITY EDUCATION LESSONS FOR YEAR 2022

1. I would like to withdraw my child, _____, of
(full name of child)
_____, from Sexuality Education lessons for 2022.
(class of child)
2. My reason(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: _____
3. Thank you. _____

Parent's Name & Signature

Contact No. (mobile)

Email address (optional)