<u>Annex A [Parent Opt-out Form</u> –This section is applicable <u>only</u> if parents wish to opt their child out of the Sexuality Education programme.]

Date	e:				
Pare	ent's l	Name:			
Pare	ent of	(Child's na	ame):		_
Name of Principal Mr Jason Goh					
Name of School			Hougang I	Primary School	
Dea	r Prin	cipal			
		SEX	UALITY EI	DUCATION PROGRAMME	FOR YEAR 2022
1.	Ιv	vould like t	o withdraw r	my child,	, of
					(full name of child)
	(class of chi		om the Sexuality Education pro	ogramme for 2022.
2.	My reason(s) for my decision to opt my child out of the programme:				
		Religiou	s reasons		
		My child	is too young	j .	
	☐ I would like to personally educate my child on sexuality matter				uality matters.
	☐ I do not think it is important for my child to attend Sexuality E☐ I have previously taught my child the topics in the SEd Progr			Sexuality Education lessons.	
				ight my child the topics in the	SEd Programme for this year.
		I am not year.	comfortable	with the topics covered in the	e SEd Programme for this
		Others:			
3.	Th	nank you.			
Parent's Name & Signature				Contact No. (mobile)	Email address (optional)