

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

Date	e:	
Pare	ent's N	Name:
Pare	ent of	(Child's name):
Nan	ne of I	Principal: Mrs Ong-Chew Lu See
Nan	ne of S	School: Pei Tong Primary School
Dea	r Prin	cipal
1.	Ιw	vould like to withdraw my child,, of (full name of child)
		, from Sexuality Education lessons for 2023.
2.	Му	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.	Th	nank you.
Pare	ent's l	Name & Signature Contact No. (mobile) Email address (optional)