[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: Mr Loh Chih Hui, Bowen Secondary School Dear Principal I would like to withdraw my child, _____ 1. ____<u>,</u> of (full name of child) ____, from Sexuality Education lessons for 2024. 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. Thank you. Parent's Name & Signature: Parent's Email address: Parent's Contact No. (mobile) Child's Full Name: Child's Class: