ANNEX A [Parent Opt-out Form – This section is applicable <u>only</u> for parents who wish to opt their child out of the MOE Sexuality Education programme for 2025.]



## **SEMBAWANG SECONDARY SCHOOL**

http://www.sembawangsec.moe.edu.sg 30 Sembawang Crescent Singapore 757704 Tel: 67566760 Fax: 67585380

## MOE SEXUALITY EDUCATION IN SCHOOLS PARENT OPT-OUT FORM

To: Mdm Koh Sembawang Secondary School

Dear Principal

1. I would like to withdraw my child, \_\_\_\_\_

(full name of child)

<u>,</u> of

, from Sexuality Education lessons for 2025.

(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: \_\_\_\_\_\_

Thank you.

Parent's Email address:	
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Parent's Contact No. (	(mobile)	

Child's Full Name:	
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Child's Class:
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Date: \_\_\_\_\_