

MOE SEXUALITY EDUCATION IN SCHOOLS PARENT OPT-OUT FORM

To: Mrs Tan Mei Chuen, CHIJ Katong Convent

Dear Principal

1. I would like to withdraw my child, _____

(full name of child)

_____, 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 Name & Signature: Parent's Email address:	
Parent's Contact No. (mobile)	
Child's Full Name:	
Child's Class:	
Date:	