



Annex A

MOE SEXUALITY EDUCATION IN SCHOOLS

PARENT OPT-OUT FORM

To: Mrs Tan Mei Chuen, CHIJ Katong Convent

Dea	r Prin	cipal
1.	I would like to withdraw my child,, of	
		(full name of child)
		, from Sexuality Education lessons for 2024. (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:
Thai	nk yo	u.
Pare	ent's/	Guardian's Name & Signature:
Pare	ent's/	Guardian's Email address:
Pare	ent's (Guardian's Contact No. (mobile)
Chile	d's Fι	ıll Name:
Chile	d's Cl	ass:
Date	e:	