_____, of

ANNEX A

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

MOE SEXUALITY EDUCATION IN SCHOOLS PARENT OPT-OUT FORM

To: Mr Vincent Lee, Compassvale Primary School

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:	
raients Name & Signature.	

Parent's Email address:	

Parent's Contact No. (mobile)
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Child's Full Name:		
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Date: _____