## **ANNEX A**



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

To: Mdm Pang Siu San, Ngee Ann Primary School

**Dear Principal** 

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

(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:	

Date: \_\_\_\_\_