

[Parent Opt-out Form – This section is applicable only if parents wish to opt their child out of the Sexuality Education programme.]

Date: _____

Parent's Name: _____

Parent of (Child's name): _____

Name of Principal: Mr Ari Manickam

Name of School: Hougang Secondary School

Dear Principal

SEXUALITY EDUCATION PROGRAMME FOR YEAR 2022

1. I would like to withdraw my child, _____, of _____ from the *Sexuality Education* programme for 2022.

2. My reason(s) for my decision to opt my child out of the programme:

- Religious reasons (Please indicate religion: _____)
 - 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 lessons.
 - I have previously taught my child the topics in the Sexuality Education Programme for this year.
 - I am not comfortable with the topics covered in the Sexuality Education Programme for this year.
 - Others: (Please specify: _____)
- _____

3. Thank you.

Parent's Name & Signature

Contact No. (mobile)

Email address (optional)