

Annex A

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

HOUGANG
SECONDARY SCHOOL



MOE SEXUALITY EDUCATION IN SCHOOLS PARENT OPT-OUT FORM

To: Mr Lee Thuan Sim, Hougang Secondary 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: _____

Child's Class: _____

Date: _____

Make the Difference

2 Hougang Street 93 Singapore 534256 Tel: 6385 1990 Fax: 6385 2015 Email: hougang_ss@moe.edu.sg