ANNEX A



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MOE SEXUALITY EDUCATION IN SCHOOLS PARENT OPT-OUT FORM

To: Mr Yee Yew Loong, Innova 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: ______ Child's Class: ______ Date: _____