Annex A

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

Date	:						
Pare	nťs N	lame:					
Pare	nt of	(Child's nar	ne):				
Name of Principal Mdm Teo Yvonne							
Name of School		School	Bedok View Secondary School				
Dear	Prino	cipal					
		SEX		ON LESSONS FOR	YEAR 2022		
1.	. I would like to withdraw my child,, of, from Sexuality Education lessons for 2022, (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. 							
					ality 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 fo this year.						
	I am not comfortable with the topics covered in the Sexuality Education lessons for this year.						
		Others: _					
3.	Th	ank you.					
	nťs N onal)	lame & Sig	nature C	ontact No. (mobile)	Email address		

*Please submit this Opt-out Form to your child's Form Teacher by Friday, 11 February 2022