

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

To: Mrs Ko-Tan Li Ling  
St Margaret's School (Primary)

Dear Principal,

1. I would like to withdraw my child, \_\_\_\_\_, of  
(full name of child)

\_\_\_\_\_ from the *Growing Years* programme for 2024.  
(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 lessons.
- 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: \_\_\_\_\_

3. Thank you.

Name of Parent/Guardian : \_\_\_\_\_

Parent/Guardian's Signature & Date : \_\_\_\_\_

Contact number : \_\_\_\_\_

Email address : \_\_\_\_\_