

St Margaret's School (Primary)

A Community of Learners Growing and Glowing for God Charity · Patience · Devotion

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ANNEX A

MOE SEXUALITY EDUCATION IN SCHOOLS PARENT OPT-OUT FORM

Dea	ar Prind	cipal,
1.	۱w	ould like to withdraw my child,, (full name of child)
		(full name of child)
	of	, from Sexuality Education lessons for 2023. (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:
Tha	ınk yol	J.
Par	ent's N	lame & Signature:
Par	ent's E	Email address:
Par	ent's C	Contact No. (mobile)
Chi	ld's Fu	Il Name:
Chi	ld's Cla	ass:
Dat	e:	