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## **ANNEX A**



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

To: Mrs Ruth Tai, Yuhua Primary School

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Dear	Pri	ncin	ıaı
Duai	1 111	ιιωιμ	a

Dea	ır Prin	cipal	
1.	Ιv	vould like to withdraw my child,, of	
		(full name of child)	
		, from Sexuality Education lessons for 2025.	
	(	class of child)	
2.	Му	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	r
		this year.	
		I am not comfortable with the topics covered in the Sexuality Education lessons for	r
		this year.	
		Others:	
Tha	nk yo	u	
Pare	ent's l	Name & Signature:	
Pare	ent's l	Email address:	
Pare	ent's (	Contact No. (mobile)	
Chil	d's Fu	ıll Name:	
Chil	d's Cl	ass:	
Date	e:		