

751, Yishun Avenue 7, Singapore 768928 | Tel: 6758 5384 | Fax: 6755 7778 www.ahmadibrahimsec.moe.edu.sg

MOE SEXUALITY EDUCATION IN SCHOOLS PARENT OPT-OUT FORM

To: Miss Tan Ke-Xin, Ahmad Ibrahim Secondary School

Dear Principal

1. I would like to withdraw my child, ______, of

(full name of child)

____, 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:

Thank you.

- Parent's Name & Signature: _____
- Parent's Email address:
- Parent's Contact No. (mobile)

Child's Full Name:

Child's Class:	 	 	

Date: _____