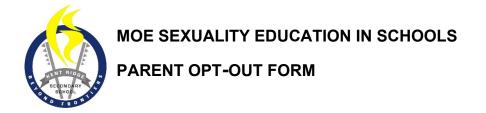
ANNEX A

[Parent Opt-out Form – This section is applicable <u>only</u> for parents who wish to opt their child out of the MOE Sexuality Education programme for 2024.]



To: Mdm Valerie Goh, Principal, Kent Ridge Secondary School

Dear Mdm Goh

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

(full name of child)

_____, from Sexuality Education lessons 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.
 - □ 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 Contact No. (I	mobile)	
-------------------------	---------	--

Date:	