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

Dat	e:	
Par	ent's l	Name:
Par	ent of	(Child's name):
Mrs	Tan \	Wan Yu
Mille	ennia	Institute
Dea	ar Prin	cipal
		SEXUALITY EDUCATION PROGRAMME FOR YEAR 2022
1.	Ιv	vould like to withdraw my child,, of
		(full name of child)
		, from the Sexuality Education programme for 2022. (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 this year.
		I am not comfortable with the topics covered in the Sexuality Education lessons for
		this year.
		Others:
3.	Th	nank you.
Par	ent's l	Name & Signature Contact No. (mobile) Email address (optional)