

CONCORD PRIMARY SCHOOL

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[Parent Opt-out Form]

Date	e:		
Pare	ent's N	Name:	
Pare	ent of	(Child's name):	
Mr T	an Si	ew Tiong	
Con	cord I	Primary School	
Dea	r Prin	cipal	
1.	Lw	vould like to withdraw my child,, of	
••	. •	(full name of child)	
		, from Sexuality Education lessons for 2022.	
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:	
3.	Th	you.	
Pare	ent's l	Name & Signature Contact No. (mobile) Email address (ontional)	