Date: ______________

Parent’s Name: ________________________________

Parent of (Child’s name): _____________________________

Dear Principal

THE RELATIONSHIP MANAGEMENT PROGRAMME FOR YEAR 2016/17

Parent Opt-out Form –

Applicable only if parents wish to opt their child out of the Relationship Management (RM) programme

1. I would like to withdraw my child, ______________________________________, of ________________________, from:

   (full name of child)

   (class of child)

   ☐ The entire Relationship Management programme for 2016/17.
   ☐ Lesson 1: What is love?
   ☐ Lesson 2: What is not love?
   ☐ Lesson 3: How to find & keep love?
   ☐ Lesson 4: What can hurt love?
   ☐ Lesson 5: What can be done when love goes wrong? (Part 1)
   ☐ Lesson 6: What can be done when love goes wrong? (Part 2)
   ☐ Lesson 7: How to make love last?
   ☐ eTeens (Health Promotion Board STI/HIV Prevention Programme)

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 lessons.
   ☐ I have previously taught my child the topics in the RM Programme for this year.
   ☐ I am not comfortable with the topics covered in the RM Programme for this year.
   ☐ Others: ______________________________________________________________

3. Thank you.

_______________________  ______________________  ______________________
Parent’s Name & Signature  Contact No. (mobile)  Email address (optional)