



# SI LING PRIMARY SCHOOL

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Vision: Every Si Ling Pupil a Scholar who Leads and Serves

Mission: We, in partnership with all stakeholders, are committed to nurture our pupils to be thinking learners and gracious citizens

13/01/2017

Dear Parents/ Guardians

## **MOE SEXUALITY EDUCATION IN SCHOOLS - *THE GROWING YEARS PROGRAMME***

Sexuality Education (SEd) in schools is about enabling students to understand the physiological, social and emotional changes they experience as they mature, develop healthy and rewarding relationships including those with members of the opposite sex, and make wise, informed and responsible decisions on sexuality matters. SEd is premised on the importance of the family as the basic unit of society. This means encouraging healthy, heterosexual marriages and stable nuclear family units with extended family support. The teaching and learning of SEd is based on respect for the values and beliefs of the different ethnic and religious communities in Singapore on sexuality issues.

2. The goals of Sexuality Education are:
  - (i) To help students make wise, responsible and informed decisions through the provision of accurate, current and age-appropriate knowledge on human sexuality and the consequences of sexual activity;
  - (ii) To help students know themselves and build healthy and rewarding relationships through the acquisition of social and emotional skills of self-awareness, management of their thoughts, feelings and behaviours, development of empathy for others, possession of effective communication, problem-solving and decision-making skills; and

- (iii) To help students develop a moral compass, respect for themselves and for others as sexual beings, premised on the family as the basic unit of society, through the inculcation of positive mainstream values and attitudes about sexuality.
3. The key messages of Sexuality Education are:
- (i) Love and respect yourself as you love and respect others;
  - (ii) Build positive relationships based on love and respect (which are the foundation for strong families);
  - (iii) Make responsible decisions for yourself, your family and society; and
  - (iv) Abstinence before marriage is the best protection against STIs/HIV and unintended pregnancies. Casual sex can harm and hurt you and your loved ones.
4. Please visit the school's Sexuality Education webpage <http://silingpri.moe.edu.sg/for-parents/sexuality-education> for more information on Si Ling Primary School's Sexuality Education Programme for 2017.
5. Thank you.

Yours faithfully,

\_\_\_\_\_  
Lim Chew Hiong Richard  
Signature of Principal

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**[Acknowledgement of Letter (For all parents)]**

Dear Mr Lim Chew Hiong Richard

**THE GROWING YEARS PROGRAMME FOR YEAR 2017**

I acknowledge receipt of letter from the school dated on 13/01/2017 regarding the school's sexuality education, *Growing Years* programme that will be taught in 2017. I have read and understood the information provided on the content coverage and delivery of the programme.

\_\_\_\_\_  
*Parent's Name & Signature*

\_\_\_\_\_  
*Date*

Parent of: \_\_\_\_\_ ( )  
*(Child's Name)*

\_\_\_\_\_  
*Class*

**[Parent Opt-out Form –This section is applicable only if parents wish to opt their child out of the Growing Years programme.]**

Date: \_\_\_\_\_

Parent's Name: \_\_\_\_\_

Parent of (Child's name): \_\_\_\_\_

Lim Chew Hiong Richard

Si Ling Primary School

Dear Principal

**THE GROWING YEARS PROGRAMME FOR YEAR 2017**

1. I would like to withdraw my child, \_\_\_\_\_, of  
(full name of child)  
\_\_\_\_\_ from the *Growing Years* programme for 2017.  
(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 lessons.
- I have previously taught my child the topics in the *GY* Programme for this year.
- I am not comfortable with the topics covered in the *GY* Programme for this year.
- Others: \_\_\_\_\_

3. Thank you. \_\_\_\_\_

\_\_\_\_\_  
*Parent's Name & Signature*

\_\_\_\_\_  
*Contact No. (mobile)*

\_\_\_\_\_  
*Email address (optional)*