TRANSFER IN / WAITING LIST APPLICATION FORM

Full Name (as in BC)								
Birth Certificate No					Date of Birt	th :		
Nationality		*Singapore Citizen / Singapore PR / Others (Pls Specify) :						
Type of Pass		☐ Singapore B/C ☐ S'pore Citizen ☐ Entry/Re-entry Permit						
Pass No.								
Mother Tongue Language		* Chinese / Malay / Tamil / Non-Tamil Indian Lang:					☐ Exemption	
School / Country From								
Present Class / Level					Level Requested :			
PARENTS' PARTICULARS								
	Father				Mother			
Full Name								
Nationality								
Identification Type								
Identification No.								
Address								
Contact No.								
Signature / Date								
Reason for Seeking : Admission/ Transfer								
FOR OFFICIAL USE ONLY								
Received By		Name & Designation of Staff					Date	
For Intl Students Only		☐ AEIS Centralised Test ☐ Qualifying T			est	□ PACT Test		
Placement Test		Date:	Level:	EL:		MA:	MT:	
Admission		☐ Approved ☐ Not Approved				Class Allocation:		