

SCHOOLCARE REQUEST FORM

Pro-Teach Education Group Pte Ltd

1 Holland Grove Road Singapore 278790

Office: 82995133 Email: henrypark@pro-teach.com



Please complete the request form if you want to enrol your child in our centre and submit it to Pro-Teach by **21 November 2019** via email or by hand. Please drop the form into the Pro-Teach P1 Registration Box at Henry Park Primary School General Office by 21 November 2019.

Upon receiving your request, we will inform you of the outcome by Nov 24, 2019 via email or phone. Thank you.

DEAR PARENTS, PLEASE NOTE THAT INCOMPLETE FORM AND LATE SUBMISSION WILL NOT BE CONSIDERED.

Student's Particulars

Name _____	Nationality	<input type="checkbox"/> S'porean	<input type="checkbox"/> PR	<input type="checkbox"/> Others _____
Date of Birth _____ / _____ / _____ (DD / MM / YY)	Gender	<input type="checkbox"/> Male	<input type="checkbox"/> Female	Age _____
Class _____	Form Teacher	_____		
Home Address _____	Postal Code	_____		

Parent's Particulars

	Father / Guardian	Mother / Guardian
Name	_____	_____
Nationality	<input type="checkbox"/> S'porean <input type="checkbox"/> PR <input type="checkbox"/> Others _____	<input type="checkbox"/> S'porean <input type="checkbox"/> PR <input type="checkbox"/> Others _____
Contact no. (R)	(Hp) _____	(R) (Hp) _____
(O)	(Pg) _____	(O) (Pg) _____
Email Address	_____	_____

Needs Assessment

a) Please list the occupants (including family members, domestic helper, etc) living with the student at the above Home Address.

Name of Occupant	Date of Birth	Relationship to the Student	Employment Status (employed/ retired/ unemployed / undergoing training / looking for job / serving NS / schooling)

b) Currently, what is the care arrangement for your child/ward?

- Self-care/ spouse-care
 Child/ Student Care Centre outside the school
 Care by maid/ nanny
 Others *pls specify:* _____
 Care by grandparents/ other family members

c) In case our after-school care service is not available for your child/ward, what would be your alternative after-school care arrangement?

Enrolment Day 2019	Date: 30th November 2019, Saturday	Time: 8:00am	Venue: Teaching Lab
---------------------------	------------------------------------	--------------	---------------------

Fee Subsidy Assessment

Please reply the following questionnaire if you would like to apply for Student Care Fee Assistance (SCFA) scheme offered by Community Development Councils (CDC) and Pro-Teach Care Fund subsidy scheme.

Subject to CDC's approval, families with a total gross monthly income of not more than \$4000.00 may be considered.

d) What is the total gross monthly income* of the family?

- \$1500 & below
 \$2501 to \$3000
 \$1501 to \$2000
 \$3001 to \$3500
 \$2001 to \$2500
 \$3500 to \$4000

* gross income is income before CPF deduction

e) Who works at least 56 hours a month?

- Father
 Mother
 Others (specify: _____)

f) What is the family size?

- 4 members
 More than 5 members (specify: _____)

I, the undersigned, declare that the above information provided is true to the best of my knowledge.

Signature: _____
 Name: _____
 Date: _____
 Relation to child: _____

