

Application No:

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(For Official Use)



好学力行

中正中学 (义顺)

CHUNG CHENG HIGH SCHOOL (YISHUN)

E-mail : cchys@moe.edu.sg 11 Yishun St 61 Singapore 768547 Tel :67583912

APPLICATION FOR TRANSFER INTO SECONDARY 1/2/3* IN YEAR 201__

Instructions:

1. Please provide all relevant information requested below.
2. Please submit **in person** the completed form with relevant supporting documents. The supporting documents to be attached include (a) this appeal application form, (b) photocopy of PSLE result slip/SPERS result slip/AEIS result slip, (c) photocopy of MOE option form (indicating choice of schools selected), (d) current school results, (e) CCA records, and (f) any other relevant supporting document (if appropriate).
- 3. An incomplete form submitted without the attached supporting documents will not be processed.**

Student Particulars

Student's Name (as in Birth Certificate):		Gender:	Female / Male *	
NRIC/Identification Number:		Nationality:		
Address:		Mother Tongue:	Chinese / Malay / Tamil / Others / Exempted *	
		Contact Number:	(Home)	
Primary School:			(Mobile)	
Email Address:				
PSLE Aggregate Score:	PSLE Results			
	Subject Grades			
	EL	MT	MA	SC
CCA in Primary School:		Other Talents:		
Secondary 1 School Posted To: (if applicable) / Current Secondary School				
Offered HMTL (if applicable)	*Yes / No (Chinese, Malay, Tamil)			

I am / am NOT* posted to _____ via Direct School Admission Exercise.

Reason(s) for the application:

Achievements

List achievements in co-curricular activities (please only specify the highest achievements to date) – in sports, games, clubs and societies, Science/Maths Olympiads and/or community service. *If more space is required, please submit a separate sheet and indicate that a separate sheet has been submitted in the space below.*

Please indicate any additional relevant information, other than those already indicated above.

Parent/Guardian Particulars

	PARENT	GUARDIAN (if any)
Name		
Occupation		
Name of Company		
Telephone (Mobile)		
Telephone (Office)		
Email Address		
Race		
Citizenship		

Date	Name of Student	Signature of Student

Date	Name of Parent/Guardian	Signature of Parent/Guardian

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Rejected /Admitted to: _____ With effect from: _____

Remarks:

Date: _____ Signature of Principal: _____