



Email: cchys@moe.edu.sg 11 Yishun St 61 Singapore 768547 Tel: 67583912 Fax: 67587397

## **2018 Direct School Admission – Secondary (DSA-Sec) Exercise**DSA-Sec Application Form

Please complete all details in the form and submit to Chung Cheng High School (Yishun) by **2**<sup>nd</sup> **July 2018, 5pm**.

You may wish to attach duplicates of the following supporting documents (if applicable):

- 1. Relevant CCA records;
- 2. Awards or certificates for involvement/attainment in competitions, tests or performances.

## **Applicant's Personal Particulars**

Name of Student:		Gender:	Male / Female*
BC No / FIN /		Nationality:	
Passport No*			
Address:		Higher Mother	Chinese / Malay /
		Tongue/Mother	Tamil / Others /
		Tongue*	Exempted *
		Contact Number	(Home):
Primary Schoo	l:		(HP):
			· · · /·
Email Address:			

## **Applicant's Strengths and Background**

Please state your CCA in primary school:			
Previous experience or skills	Dance/ Drama/ Singing/ Sports/ Others *		
	If you have any previous Sports experience, please specify your skill/s:		
	If others, please specify your skill/s:		
Ability to play a musical instrument	Yes / No/ Not Applicable *		
If yes, please state the musical instrument			
you play (and level of competency if	GradeTheory Grade		
applicable)	Year/s of playing experience		
Ability to sight-read (musical notes)	Yes / No/ Not Applicable *		
State your role in CCA if any			
(leadership position or any duties)			

<sup>\*</sup> please delete accordingly

I am interested in the foll	owing CCA	(please tick <u>or</u>	<u>ne</u> box only)	:	
☐ Chinese Dance (Girls)	☐ Chinese Drama		☐ Chinese Orchestra		☐ Choir
☐ Guzheng Ensemble ☐ Interr		tional Dance	☐ Sympho	nic Band	
☐ Basketball (Boys only) ☐ Fencin		□ Volleybal		I	□ Wushu
Applicant's Past Experier	<u>ice</u>				
Using the table below, l school/Inter-school, or/a SYF, NDP Performances, o	nd Internat	tional compet	itions or pe	•	
Name of Competition/Performance		Date		Award(s) (if applicable)	
I understand that once m (Yishun), my child/ward Posting Exercise to opt	will <u>NOT</u> b for second	pe allowed to ary schools. N	participate My child/wa	in the annua ard is expecte	l Secondary One d to honour the
commitment to the poste My child/ward will also <u>N</u> PSLE results.				-	
Name of Parent/Guardia	nn* N	RIC/Passport N	No.	Signature	Date
* please delete accordingly					
<b>Note</b> 1. All application forms rece	eived will be	acknowledged	via email.		

- 2. Short-listed applicants will be informed of their audition and interview dates **by Fri 13 July**.
- 3. For any enquiries, please contact Mr. Victor Tan via email at victor\_tan@moe.edu.sg or phone at 6758 3912 ext. 217