

<b>STUDENT'S PARTICULARS</b> 学生资料		
Birth Cert/NRIC No.	Name 姓名	Class 班级/Year 年
<b>Address &amp; Contact Number</b> 地址和联络电话号码		

<b>FAMILY PARTICULARS</b> 家庭资料 (list only family members living in the same house) 只限同住家庭成员				Gross Monthly Income (if student, state school & level) 月收入 (学校与年级)
Name 姓名	Age 年龄	Relationship to Applicant 关系	Occupation 职业	
1		Father 父亲		
2		Mother 母亲		
3				
4				
5				
Please attach copy of latest payslip if employed or past 2 years' Income Tax Notice of Assessment if self-employed 请附上最近期薪水单; 若是自雇人士请附上两年所得税估税单			Total Monthly Household Income 家庭每月总收入	\$

<b>PARENT/GUARDIAN'S DECLARATION</b> 家长/ 监护人 宣布		
I declare that all particulars given in this application form & copies attached hereto are true, & I have not willfully suppressed any material fact. Should any false or incomplete information be given, the committee reserves the right to terminate my application without prior notice. 我确定这张表格和附件上的资料都是正确的; 而且也没有故意隐瞒某些重要事实。否则, 董事会有权利取消我的申请。		
Parent's/Guardian's Name 家长/监护人 姓名	Signature 签名	Date 日期

----- BELOW FOR OFFICE USE ONLY -----

<b>PRINCIPAL'S RECOMMENDATION</b> 校长的推荐	<b>SELECTION BOARD'S DECISION</b> 董事会的决定
Recommended 推荐 / Not Recommended 不推荐	Approved 批准 / Not Approved 不批准
Principal's Signature, Date 校长签名, 日期	Chairman's Signature, Date 主席签名, 日期

Eligible / Ineligible	Per Capita Gross Household Income: \$
SMC bursary period:	iBENS ref no.
iBENS DEC sign/date	iBENS AO sign/date
MOE FAS: Yes (Std Misc Fees waived) / No	Edusave Standing Order: No / Yes (to be terminated)
SMC bursary amount:	\$ 150.00
Less Misc. Fee Arrears:	- \$
Less Misc. Fee Due till end of School Year:	- \$
Nett SMC bursary amount to recipient:	\$
Cheque No. OCBC	
Recipient Sign/Date:	