

CTP FEE WAIVER APPLICATION 2022

- 1 This Application Form must be completed by the Parent/Guardian of the applicant.
- 2 Please provide all supporting documents stated on Pg. 2 of this form

SECTION A : STUDENT'S PARTICULARS

Name as in NRIC/BC : _____

NRIC/BC : _____ Contact No. : _____

Programme Name : **STEP/TEACH/PROJECT GUIDE (Please circle accordingly)**

School/Centre Name : _____

SECTION B : PARTICULARS OF FAMILY MEMBERS IN THE SAME HOUSEHOLD

Name	NRIC	Date of Birth (DD / MM / YYYY)	Status (Married/ Single/ Divorced/ Widowed/ Deceased)	Race (Indian/ Others)	Citizenship (Singaporean/ Singapore PR/ Foreigners)	Relationship To Student	Occupation	Net Individual Income
							(A) Total Net Household Income	
							(B) Number of Family Members	
							PCI [A/B]	

SECTION C : DECLARATION/ADDITIONAL INFORMATION TO SUPPORT CASE

SECTION D : DECLARATION BY PARENT/GUARDIAN

I am contributing to SINDA via CPF *YES / NO

I am currently receiving (Please Tick)

- | | | |
|--|--|---------------------------------|
| <input type="checkbox"/> SINDA Bursary | <input type="checkbox"/> Assistance from a Family Service Centre (FSC) | <input type="checkbox"/> Others |
| <input type="checkbox"/> School Pocket Money Fund (SPMF) from an FSC | <input type="checkbox"/> MOE Financial Assistance Scheme (FAS) | Please Specify : _____ |
| <input type="checkbox"/> SAC Sponsorship | | |

- 1) I declare that all information provided above is true and accurate to the best of my knowledge. I also understand that the programme fees are non-refundable.
- 2) I understand that SINDA will not be held liable for any mishaps that may arise during the duration of the entire programme.
- 3) I hereby authorise SINDA to release information to the Ministry of Education (MOE) and my child's / ward's school and vice versa for the purpose of monitoring and evaluating my child's / ward's performance.
- 4) I **consent / do not consent*** to SINDA sharing the information provided to other government agencies (besides MOE) to benefit from any other services that may be provided by them.
- 5) I consent to SINDA using the information provided to enable my child / ward (below the age of 21) or any other family members listed here, to benefit from SINDA's programmes and services
- 6) I understand SINDA may employ professional services for its programmes and information that is released to service providers is for the benefit of my child / ward.
- 7) I agree to SINDA using any video, audio recording or photograph taken during this programme for any promotional purposes by SINDA.
(please delete accordingly)

Name of Parent / Guardian

Signature & Date

SECTION E : MANDATORY DOCUMENTS ATTACHED (To Be Verified by respective SHG Personnel)

Status:

- Photocopy of Student's NRIC/BC
- Photocopy of NRICs/BCs of all Family Member's listed in Section B
- At least one of the following Documents (Income documents of all working adults must be provided)
 - Latest pay slip
 - CPF contribution history for the last 3 months
 - Income tax assessment Form
 - Income declaration form accompanied by CPF contribution history for the last 3 months
- Supporting documents if receiving MOE Financial Assistance or Other forms of Financial Assistance
- Other supporting documents (If applicable)

- Death Certificate; Divorce Documents (with details on custody and maintenance); Copy of Prison visit card;
Letter of Retrenchment / Termination / Resignation; Medical documents; Document proof of Public Assistance Fund or other welfare fund; Bankruptcy documents, etc.

Verified by :

Organization & Name of SHG officer

Signature

Date

Remarks:

SINDA HQ USE ONLY

Status: *Approved / Rejected

Fee Payable: _____

Remarks:

Prepared By :

Name / Division

Signature

Date

Verified By :

Name / Division

Signature

Date

Approved By :

Name / Division

Signature

Date