## NGEE ANN PRIMARY SCHOOL Application Form for Seeking Transfer / Admission

Year to be admitted:					Level to be admitted:			
	s are to sul						hotocopies of the child's	
Particulars of Ch								
Name					Birth Ce	rt No.		
Date of Birth (DD/MM/YY)					Gender		Male / Female	
Nationality	☐ sc	SPR	Ra	ice	Mother <sup>-</sup>	Tongue	CL / ML / TL	
Current School					Current	Level		
Name of sibling in Ngee Ann Primary (If any)				Class	Any sibli for trans Name &			
Particulars of Pa	arent's							
Name of Father					NRIC N	0.		
Email Address					Contact No.			
Name of Mother					NRIC N	0.		
Email Address					Contact	No.		
Residential Address								
Remarks / Reaso	ons for tra	nsfer						
CCA	CA Special Strengths					Medical Condition		
Signature of Parent/Guardian						Date		
	n will be va	alid till end of next only if there is a						
FOR OFFICE USE ONLY				Rema	Remarks:			
Form Received by	':							
Date :				Class	Class : Year :			