



新加坡福建会馆推荐小一报名 (2B 阶段) 申请表格
SINGAPORE HOKKIEN HUAY KUAN
 Application for Phase 2B Recommendation in
 MOE Primary One Registration Exercise for Admission to Primary One in 2020
 Application deadline: 1 July 2019
 (For SHHK Members Only)

编号 Ref:

Please submit a copy of : 1) NRIC of both parents 2) Child's Birth Certificate Important Note: Please bring along original documents during submission for verification.		
申请报读学校: School Applied for: <input type="checkbox"/> Tao Nan School <input type="checkbox"/> Ai Tong School <input type="checkbox"/> Chongfu School <input type="checkbox"/> Nan Chiau Primary <input type="checkbox"/> Kong Hwa School You can only apply for recommendation to register under Phase 2B in <u>ONE</u> school. Please "✓" school of choice.		
学童资料 Child's information		
Name of Child (as in Birth Certificate)		学童中文姓名
出生证号码 Birth Certificate Number	出生日期 Date of Birth	性别 <input type="checkbox"/> Male Gender <input type="checkbox"/> Female
家长资料 其中一位家长必须是福建会馆会员* Parents' information Either parent must be a Singapore Hokkien Huay Kuan member*		
父亲姓名 Name of Father (as in NRIC)		会员入会批准日期 Membership Approval Date* (if applicable)
身份证号码 NRIC	手机 (H/P)	电邮 Email
母亲姓名 Name of Mother (as in NRIC)		会员入会批准日期 Membership Approval Date* (if applicable)
身份证号码 NRIC	手机 (H/P)	电邮 Email
住家地址 Residential Address		电话 Tel (Home)
声明书 Declaration		
本人声明以上所填资料属实无误。本人理解此项申请除了本人须符合推荐条件 (列于 www.shhk.com.sg), 也须经新加坡福建会馆批准, 并取决于新加坡教育部小一报名的规定及学校学额的空缺情况。本人理解并接受新加坡福建会馆保留最终决定权, 以及任何信函及电子邮件均不受理。 I declare that the information submitted above is true and accurate. I understand that my application is subject to my qualification of the criteria for recommendation for registration under Phase 2B (available at www.shhk.com.sg), the approval of the Singapore Hokkien Huay Kuan Executive Council, guidelines of Ministry of Education, and availability of vacancies. I understand and accept that the decision of Singapore Hokkien Huay Kuan is final and that no correspondence will be entertained.		
会员签名 Signature of Member		日期 Date
FOR OFFICIAL USE		
Application received by:		Date:
Criteria: (Tick where applicable)	<input type="checkbox"/> Min. 2 consecutive years of membership tenure <input type="checkbox"/> Min. 80 hours of volunteer service through SHHK (Hours: _____)	Recommended for Phase 2B Registration <input type="checkbox"/> Yes <input type="checkbox"/> No
Remarks	Submission to School Applied for <input type="checkbox"/> Yes	