APPLICATION FOR OPPORTUNITY FUND (OF) SUBSIDY (Non MOE/SCHOOL-BASED FAS STUDENTS)

*MOE/School-based FAS recipients do not need to put up this form, as they will be granted the subsidy, if applicable, without the need to apply.

Notes:

- This form is only applicable to Singaporean students who have met the following criterion.
 - Gross Household Income equal or below \$5,000 per month or Per Capita Income equal or below \$1,250.*
- Amount of subsidy provided is subjected to the availability of OF in the year. In the
 event that OF has been exhausted for that year, there would be no subsidy provided
 for non-FAS SC students.
- Please submit the following documents together with this application form:
 - Latest Payslip, CPF Transaction Statements/Contribution History and proof of other sources of income (e.g. rental, pension etc)
 - Latest Income Tax Notice of Assessment (NOA)
 - Copies of NRICs/Birth Certificates of household members
 - Student/Matriculation card for full-time student at tertiary institutions (e.g. ITE, Polytechnics, Universities, private schools) / Identification card for full-time National Servicemen (if applicable).
 - Where applicable, documents showing proof of legal guardianship (e.g. a court order or Letters of Probate or Administration)
- There is a need for at least co-payment of 20% of the cost of the activity.

Section I: Student's Particulars

Please indicate the details of the student applying for Opportunity Fund subsidy.

Name (Underline Surname)	Birth Cert/NRIC No	Level / Class

Section II: Details of Enrichment Programme/Overseas Trip

Please indicate the details of the enrichment programme/overseas trip organised by the school which the student is applying for Opportunity Fund subsidy.

SN	Title of Activity	Total Activity Cost Per Student	Name of Teacher-In- Charge
1			
2			

Damai Secondary School

Section III: Declaration of Household Income

Please include details of the family members of the student living in the same household.

S/N	Relationship (e.g. Father, Mother etc)	Birth C	ert/ NRIC No	Occupation		Monthly me (\$)
1						
2						
3						
4						
5						
6						
		Tota	al Gross Househo	old Income (GHI):		
Per Capita Income (GHI / No. of Household Members Living Together):						
	of benefits received	by my ch				
Name and Signature of Parent/Guardian [#] To delete whichever is appropriate				Date		
FOR	OFFICIAL USE OI	<u>NLY</u>				
approv	pproving Authority wi red with deviation from as below.					
	cation for OF Subsic		Approved / Re	ejected		
SI	N Title of Ac	tivity	Total Activity C Per Student		-	
1						
2	2					
	, ,					
Name & Designation			Signature		Date	