# Annex D: Intent to Purchase Personal Learning Device (PLD)

### **Dunearn Secondary School**

1.	Please tick the following ar $31^{st}$ Jan:	nd submit the form to the Form Teacher of your child's class <u>no later than</u>		
•	child's/ward's <b>Edusave</b> (to t	se the PLD bundle described in paragraph 3 of this letter and would like to he applicable limit) to pay for the PLD bundle. I understand that where there by for the PLD bundle, I will pay for the remainder in cash.		
Yes, I would like to purchase the PLD bundle described in paragraph 3 of this letter and would like fully pay for the PLD bundle in cash.				
	•	ing the PLD bundle described in paragraph 3 of this letter and would like my nromebook device in school. I am aware that this is subject to the personal with the DMA.		
Chrome	ebook device in school unle	e not to purchase the PLD, your child/ward will not be able to use his/her ss the DMA is installed on such device. As explained in paragraph 7 of this is the teacher to control the student's use of computing device during class		
2.	The default mode of collection is for your child/ward to collect his/her PLD in school and verify the condition of the computing device. The Vendor will run through a device checklist with your child/ward at the point of collection to ensure that the device is in good working condition, and for your child/ward to verify the condition of the device.			
3.	If you are concerned that your child/ward will not be able to properly verify the condition of the computing device, please notify the school and arrange to either collect the computing device personally at the <b>contractor's service/collection centre (during office hours)</b> or appoint an adult proxy to do so.			
4.	Please indicate one parent's/guardian's personal email address to be provisioned with the DN Parent's Account for viewing of your child's/ward's PLD information. This personal email account shou only be accessible by the parent/guardian.			
Parent'	s/Guardian's Personal Email	Address:		
Name NRIC/	of Student (as in BC):			
Class:				
Name of Parent/Guardian* (as in NRIC):				
Signature of Parent/Guardian*:				
Date:				

<sup>\*</sup> Please delete as appropriate.

## **Annex E: Standing Order for Use of Edusave Account**



### **MINISTRY OF EDUCATION**

# STANDING ORDER FOR USE OF EDUSAVE ACCOUNT AT GOVT / GOVT-AIDED SCHOOL

#### FOR PERSONALISED DIGITAL LEARNING PROGRAMME

Please note: This form is to be used by parent / guardian of a <u>Singaporean student</u> who wishes to use the Edusave account of his / her child / ward to pay for a personal learning device incurred by the child / ward in a Government or Government-aided School and billed by the school. Please submit the completed form to your child's / ward's school.

Stud	ent NRIC / BC No:				
Stud	ent Name:				
Scho	ool:				
Student Level / Class:					
STAN	OF EDUSAVE ACCOUNT FOR PENDING ORDER INSTRUCTION FOR EACH AS APPROPRIATE.)		ED DIGITAL LEARNING PROGRAMME ENT / GUARDIAN		
1	I wish to use my child's/ward		ve account for payment:  der the Personalised Digital Learning Programm	ne)²	
2	, -	anding instruction to authorise the school to withdraw from my child's/ward's* Edusave or the fees/charges indicated above.			
3	If the balance in my child's/ward's* Edusave account is insufficient for the deduction, I agree to pay the shortfall in cash or from my GIRO account.				
	Name of Parent/Guardian	า*	Signature of Parent/Guardian*	Date	

<sup>\*</sup> Delete whichever is not applicable.

<sup>&</sup>lt;sup>1</sup> This standing order will remain in force until terminated by your written notice sent to the school.

<sup>&</sup>lt;sup>2</sup> Includes accessories, software/applications, warranty and insurance cost at the point of initial purchase.

# **Annex F: Authorisation Form**

### **Dunearn Secondary School**

### **Authorisation Form**

working condition. Accordingly, parents/guardians v properly verify the condition of the computing dev personally at the contractor's service/collection cer	ecked at the point of collection to verify that it is in good who are concerned that their child/ward will not be able to ice should arrange to either collect the computing device atre during office hours or appoint an adult proxy to do so I, the risk of loss or damage to the computing device, and
I, Parent/Guardian* of	(name of child/ward*) of class
, authorise	("Proxy") to collect the Personal Learning
Device (PLD) issued under the Personalised Digital Le	earning Programme (PDLP) on my behalf / will be collecting
the PLD personally*.	
I am aware that the Vendor issuing the computing de	vice will run through a device check list with me/my Proxy*.
The check list will detail what I/my Proxy* should lo	ook out for when collecting the computing device to verify
that it is in good working condition.	
I authorise my Proxy to check the computing device	e on my behalf and thereafter sign the proof of receipt or
my behalf to confirm that the computing device is in	good working condition*.
Name of Parent/Guardian* Da	ate Signature

<sup>\*</sup> Please delete as appropriate.