



# MAYFLOWER PRIMARY SCHOOL

6, ANG MO KIO AVENUE 2

SINGAPORE 569948

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<http://www.mayflowerpri.moe.edu.sg>

11 January 2022

Notification 004/2022

Dear Parents/Guardian,

As part of our annual updating exercise, we seek your kind assistance in providing accurate and updated information about your child/ward for our records. Please assist us in the following:

- (i) **Complete the Student Particulars Form (see table below);**
- (ii) **Verify and update the information** in the attached '**Individual Student Details Report For Year 2022**' – if there is any change, please do so in **blue/black ink**. (See attached);
- (iii) **and Provide details on your child's/ward's medical condition.**

Thank you

Yours sincerely,

Mdm Au Yard Wah  
Year Head (P5 & P6)

Ms Cecilia Lim  
Principal

## STUDENT PARTICULARS FORM

Name of student (as in BC) : \_\_\_\_\_

Class of 2022 : \_\_\_\_\_ No. of sibling(s) : \_\_\_\_\_

Name(s) of sibling(s) in Mayflower Primary School :

(1) Name : \_\_\_\_\_ Class: \_\_\_\_\_

(2) Name : \_\_\_\_\_ Class: \_\_\_\_\_

(3) Name: \_\_\_\_\_ Class: \_\_\_\_\_

Commuter Status: \_\_\_\_\_ (if yes, please provide details below)  
Commutes in and out of Singapore: ☐ Yes ☐ No

☐ Daily Commuter ☐ Weekly Commuter ☐ Other Commuter: \_\_\_\_\_

Foreign address (if commuting): \_\_\_\_\_

Do you have a computer device at home? ☐ Yes ☐ No  
(e.g. PC, notebook, tablet computer, etc.)

Do you have access to the Internet at home? ☐ Yes ☐ No

**STUDENT'S SPECIAL INTEREST(S) AND TALENT(S)**

Kindly indicate in the table below of your child's special interest/talent which he/she may be pursuing out of school (e.g. piano, soccer, rock climbing).

S/N	INTEREST/TALENT	LEVEL OF ATTAINMENT [e.g. Grade 1, Club, Competitive, Recreational]	NAME OF CLUB/ORGANISATION/ SERVICE PROVIDER [e.g. YCK CC, Yamaha]

I hereby certify that the information provided is accurate and correct.

\_\_\_\_\_  
Name of Parent/Guardian

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Student Care Centre (SCC)**

\*My child/ward is in **MFPS Student Care Centre (SCC)**. Tick (✓) only **ONE** box.

	Yes, I <b>authorise</b> the school to share my child's/ward's medical record with SCC management.
	No, I <b>DO NOT authorise</b> the school to share my child's/ward's medical record with SCC management.