

## MINISTRY OF EDUCATION APPLICATION FORM FOR INTERBANK GIRO (FOR PAYMENT AND REFUND OF SCHOOL FEES AND CHARGES)

PART 1: FOR APPLICANT'S COMPLETION (please write within the shaded areas)

Plea	se note: You m	ay need	l 5 minutes	and yo	ou wil	l ne	ed your bank acco	unt inform	atior	to fil	l in f	this	s for	rm.
Dat	Date						Name of School STAMFORD PRIMARY SCHOOL							
To:	Name of Bank (p	olease tic	ck one)		Name of Student									
	POSB Bank		DBS Bank											
							Student BC / NRIC / F	FIN Number						
	Other Bank:			(please sp										
(a)	I/We hereby instruct	you to proce	ess the Ministry	bank's na of Education	•	DE) in	struction to debit my/our acc	count.						
(b)							does not have sufficient fun account and impose charges		me/us	a fee for	this. \	You	may a	also at
(c)	This authorization w	ill remain in					otice sent to my/our address		you or	upon red	eipt o	of my	/our v	written
(d)		e you to ter					vritten notice to me/us once	you are inform	ed by	he MOE	that t	t <b>h</b> e a	bover	named
	student is no longer	, ,	a school under i	ts billing a	dministr	ation								
► Nar	ne(s) of Account	Holder					Bank Account No.	(Please do n	ot use	the Cl	nildre	n		
For	Singapore Citize	n NRIC N	No. (Prefix w	/ith 'S'/'	Γ')	<b>•</b>	For PR / Foreigner I	Passport No	o.					
	<u> </u>		·		•			·						
Add	Iress						Signature(s)/Thumb	print(s)*/Co	ompa	ny's S	tamp	)		
Cor	ntact No.													
							(	As in Bank's	Reco	rds)				
					* For thumbprints, please go to the branch for verification									
PART 1A: FOR EDUSAVE STANDING ORDER FOR SINGAPORE CITIZEN STUDENTS ONLY														
(please tick the appropriate box)  Yes, I wish to apply to use my child's/ward's Edusave account for payment of 2 <sup>nd</sup> -tier miscellaneous fee														
	res, i wish to ap	opiy to us	e my chilu s/	walu 5 L	.uusav	e ac	count for payment of 2	1161 1111306	ilai ic	Jus iee	,			
	No, I do not wis	h to use n	ny child's/wa	rd's Edu	save a	acco	unt for payment of 2 <sup>nd</sup> -	tier miscella	neous	s fee				
PART 2: FOR MOE'S / SCHOOL'S COMPLETION														
Bank Branch MOE Bank Account Numb					oer		Level/ Cla	ass						
7	1 7 1 0 0 8 0 0 8 0 1 2 4		2 6	1	<del>                                     </del>	Cab a al C	4	T 4	$\top$	7	1			
7	1 7 1 0 0	7   1   0   0   8   0   0   8   0   1   2   4   3   6						School C	oae	1	1	<u>_</u>		4
	Bank Branch Account Number To Be Debited				d	<u> </u>		Refer	ence N	lumk	ber		-	
												L		
PAF	RT 3: FOR CO	MPLET	ION BY BA	ANK										
To: M	MINISTRY OF EDUC	ATION												
	application is rejecte Signature/Thumbprin		•		( ) V	V ron	g account number							
( ) Signature/Thumbprint # incomplete/unclear # ( ) Amendments not countersigned by applicant														
( ) Account operated by signature/thumbprint # ( ) Others:														
													_	
Name of Approving Officer						Authorised Signature					Date			