

220 Lorong Chuan Singapore 556742

Tel: +65 62803628 Fax: +65 63820344 www.stgabrielpri.moe.edu.sg

www.stgabrielpri.moe.edu.sg Email: stgps@moe.edu.sg

## Request for a place at Student Care Centre, St Gabriel's Primary School

School-based Student Care Centres provide an important after-school care support for students, especially those from less-advantaged backgrounds who could benefit from a structured environment.

To assist us with the enrolment decision, please complete the following:

Stude	nt's Particulars		
Name	(as in Birth Certificate)  Birth Cert No:		
Class:			
<u>Paren</u>	t/ Guardian's Particulars (next-of-kin)		
Name	: Relationship: Father (as in NRIC)	r/ Mothei	/ Guardian
Email:	Contact No:(HP)		(Home)
	Please answer the questions below:		
1	My child is a Singapore Citizen or Singapore PR.	□Yes	□No
2	My child is on / will be applying for MOE Financial Assistance Scheme.(Students on MOE FAS or school FAS will be given priority)  https://www.moe.gov.sg/education/financial-assistance/moe-financial-assistance-scheme-(fas)	□Yes	
3	Both the parents are working full time.	□Yes	□No
4	I have a domestic helper/ caregiver staying with the family.	□Yes	
6	Total Household monthly income (\$):  □ <1000 □ 1001-2000 □ 2001-2500 □ 2501-3000 □ 3001-3500 □ 3501-4000 □ 4001-7500 □ Above 7501  Any additional information for school's consideration:	0	
2) In o meet t	receipt of this form does not guarantee a place in the Student Care Centre. rder to cater to families who need the after-school care support, students enroll he following requirements:  Student should attain a minimum 80% attendance in the SCC, during s Students should not be fetched home from the centre before 4.30 pm reasons. ase submit this reply slip via email to <a href="mailto:stgps@moe.edu.sg">stgps@moe.edu.sg</a> by <a href="mailto:8 November 2021">8 November 2021</a>	school te n, unless	erms. s there are valid
Parent's/ Guardian's Signature Date:			
Date re Decision	ficial use: eceived: on by the school: on by: Signature:		