16 Lorong 7 Toa Payoh Singapore 319320 Tel: 66774957 (after 2pm)

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Email: feedbackpcps@aceatwork.com.sg



Instructions

- (1) Please note that parents/ guardians need to submit individual application for each child/ ward.
- (2) Failure to complete the compulsory fields will render your registration rejected.
- (3) For existing students in Pei Chun Public School Student Care Centre, parents/guardians do not need to fill up this registration form. Student Care Centre will contact you directly on the registration.

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Student Care Registration Form

Student's Particulars						
Name of Student						
BC No.						
Date of Birth						
Citizenship		Singaporean / PR / Others				
Gender		Male / Female				
Class (indicate <u>one</u>)		Incoming Primary 1 2022 ()		Primary () 2021		
No. of members i household	n the					
Address						
Postal Code						
Home No.						
Medical History						
Is your child currently enrolled in a Student Care Centre?		Yes / No Name of Student Care Centre:				
Mother's Particulars						
Mother's Name						
Place of Birth			Nobile No:			
Citizenship	Singaporean / PR / Others					
Email Address						
Marital Status	Single / Married / Divorce					
Occupation						
Monthly gross income	\$					

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Father's Particulars						
Father's Name						
Place of Birth			Mobile No:			
Citizenship	Singaporean / PR / Others					
Email Address						
Marital Status	Single / Married / Divorce					
Occupation						
Monthly gross income	\$					
Reason for applying for student care						
Are you currently receiving or have applied fo Subsidy (FAS) from Pei Chun Public School?			ncial Assistance	Yes / No		
Is there anyone at home during office hours? If yes please list , and their relationship to the child						
Name			Relationship			
Accident Plan						
The centre has purchased a basic accident plan for all students in the student care program. However, parents are strongly encouraged to purchase your own accident plan for additional coverage.						

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Student Care Registration Form

Declaration

,, parent/guardian of	
do hereby declare that all the above information is true and correct to the best of	of my knowledge and
will inform Ace@work Schoolcare Pte Ltd should there be any changes to the inf	ormation above.
Signature of Parent/Guardian	Date