

STUDENT ADMISSION
For attention of the Administration Manager



**SINGAPORE
CHINESE
GIRLS'
SCHOOL**

APPLICATION FOR ENTRY FOR SECONDARY SCHOOL

Applying for: (Please tick ✓ accordingly)

	O-level	IP	Both
Sec 1			
Sec 2			
Sec 3			

Student's Particulars

Citizenship: Singaporean / Singapore PR*

Name of Applicant: _____ BC no.: _____

Date of Birth: _____ Telephone (Home): _____ Handphone: _____

Address: _____

Email: _____ Postal code: _____

Please attach copies of the following:

Last 2 years' school results SPERS result slip (if applicable)

PSLE result slip Testimonials (if applicable)

Are you successfully posted through DSA? Yes / No*

If yes, to state name of School: _____

Are you currently on Leave of Absence (LOA) with any school in Singapore? Yes / No*

If yes, to state name of School: _____

Name of Present School: _____

CCA / Special Strengths / Talents: _____

Reason for application to SCGS: _____

Are you a returning Singaporean? (tick if applicable)

- Have you sat for the SPERS exam (MOE)? Yes / No* If Yes, to state date of exam: _____

- Have you secured a place in any mainstream school in Singapore? Yes / No*

If Yes, to state name of School: _____

Contact Person for Communication Purpose: Father / Mother / Guardian*

Name of Parent / Guardian*: _____

Office contact no. _____ Handphone: _____

Address (if different from above): _____

Email (if different from above): _____ Postal code: _____

_____ Date _____ Signature

* Select or tick ✓ accordingly

Important Notes:

1. This form is only valid for the Year of Proposed Entry and for One Admission / Placement Test (if any for the year).
2. Applicants will only be notified if there is a vacancy.
3. Applicants may be required to sit for the Admission / Placement Tests set by the school to determine the appropriate level and class.
4. Admission Test Fees will be advised through a separate email. (if applicable)