

CIS Secondary Academic Preparation Programme application form.

ATTACH ONE
PHOTO OF
STUDENT
HERE

A. STUDENT INFORMATION

Student's last name:	
Student's first name:	
Student's date of birth:	
Student's gender:	Male Female
Residency status (DP / PR / STP):	
Residency pass number (if any):	
Nationality:	
Interested in applying for CIS Mainstream Programme in August 2017?	Yes No
Grade level completed:	
Previous school country:	
Heard about CIS via:	
First language:	
English proficiency level (Low, Medium, High or APTIS scores, if available) :	
Any health conditions?	
Any learning or behavioral difficulties?	
Other information:	

B. FAMILY INFORMATION

Father's full name:	
Mother's full name:	
Student is residing with:	Mother _ / Father _ / Caregiver _ / Others:
Address in Singapore:	
Father's phone number:	
Father's email:	
Mother's phone number:	
Mother's email:	
Caregiver's full name:	
Caregiver's phone number:	
Caregiver's email:	
Emergency contact person:	
Relationship to student:	
Emergency contact number:	

C. PROGRAMME

Enrollment period (Please select)	<p>Commencement date:</p> <p>Block 1 (Jun 19 to Jul 14, 2017) – S\$2,114.32* *26 Jun is a public holiday - no class</p> <p>Block 2 (Jul 17 to Aug 11, 2017) – S\$2,114.32* *9 Aug is a public holiday - no class</p> <p>Block 3 (Aug 14 to Sept 8, 2017) – S\$2,114.32* *1 Sept is a public holiday - no class</p> <p><i>All fees above are inclusive of GST</i></p>
Payment:	Total cost: () – Official use
Payment mode:	<p>Cash / Cheque / Credit card</p> <p><i>*Payment by Credit card only available on campus, 3% Administration Fee will apply</i></p>

Students commencing classes midway through a block shall be entitled to have their Tuition Fees pro-rated by week.

D. PERSONAL DATA PROTECTION ACT

In submitting my personal data to you and signing this form, I acknowledge and consent to your collection, use, process or disclosure of my/my child's/my ward's personal data for the purposes reasonably required in connection with your provision of services, including but not limited to those purposes specified in your Personal Data Protection Policy*, the terms of which are hereby incorporated by reference.

I also consent to the disclosure of my/my child's/my ward's personal data to your third party service providers and/or other third parties, whether within or outside Singapore, for one or more of the abovementioned purposes.

*A copy of our Personal Data Protection Policy can be found on our website or by request. If you have any questions relating to our Policy or would like to withdraw your consent to use of your data, please contact our Data Protection Officer at pdpa@cis.edu.sg.

E. PARENT'S CONSENT

I confirm that I understand the refund policy for CIS Secondary Academic Preparation Programme whereby fees once paid (for CIS Secondary Academic Preparation Programme) are not refundable.

I confirm that I understand that if payment for CIS Secondary Academic Preparation Programme is not received within 7 working days, my child will be removed from the programme.

I give my permission to Canadian International School to use my child's photography/video in medium used for advertising purposes.

I give my permission for my child to attend CIS Secondary Academic Preparation Programme related field trips that involve travelling to another location.

Please note:

Students must be residing with at least one parent/relative or parents' appointed caregiver whilst enrolled at CIS.

F. ACCURACY OF INFORMATION

I warrant that all information submitted in this form, including my/my child's/ward's personal data, is true and accurate and undertake to notify the school promptly of any changes.

Where I have provided personal data relating to other individuals (including minors), I represent and warrant that I am authorised to provide their personal data to you and have obtained their consent to the collection, use, processing and disclosure of their personal data in accordance with the purposes reasonably required in connection with your provision of services.

Parent's/Caregiver's signature: _____

Date: _____