



iStudySmart™ PROGRAMME APPLICATION FORM

For current DAS student

A programme by the English Language and Literacy Division

This form comprises of **two mandatory** parts and all fields must be completed.

Part 1 - to be completed by child's parents

Part 2 - Bursary application to be completed by child's parents, (if applicable)

No request for refund once the student logs in and attends the first e-lesson for the term.

1 FOR PARENTS

PARTICULARS

Child's Name (in full) : _____

Date of Birth : DD / MM / YYYY

BC/FIN/IC/Passport No.: _____

Current School Level : _____

Race : _____

For Secondary students, please tick: NT NA Express

Current DAS Learning Centre
(refer to legend on page 2)

- AMK BDK BJ8 CCK CTP JPT PWP
 QTN REX SKG TPN WDL YSH SRN

iStudySmart™ is currently available at the following centres. Please indicate your preferred learning centre(s).

PWP	BJ8	JPT
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1st choice: _____ 2nd choice: _____

REFERRAL SOURCE

Where did you hear about iStudySmart™ programme?

- Internet (DAS Website) Internet (other websites)
 Awareness Talks Media (news, radio, newspapers)
 Word-of-mouth from _____ Others _____

CONTACT DETAILS

Name & Signature: _____ Tel: _____

Relationship to child: _____ Email: _____

Comments on child's studying habits and learning, in general: (e.g. time management skills, prioritisation skills, writing skills, etc)

2 BURSARY APPLICATION

Is your child currently receiving bursary for the Main Literacy Programme (MLP)?

YES

Current MLP bursary percentage 100% 90% 70% 50% 33%

NO

I would like to apply bursary for iStudySmart™.
Kindly complete the bursary application form.

Please note and tick:

1. Bursary is ONLY applicable for students who are Singaporeans or Permanent Residents.
2. I/We give consent to the DAS to share our names and my child's progress with donors who support this bursary.

I have read and understood the bursary terms as above.

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Current MLP bursary percentage

100%	90%	70%	50%	33%

% Awarded _____ Start Date _____

Date app received via SAS Admin	
Date app received via LC	
Date app submitted to the Supervisor	
Date app approved by Supervisor	

REMARKS:

APPROVED _____ **REJECTED**

Authorised by : _____

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Received by: _____ Learning Centre: _____ Date: _____

*Please despatch form to SpLD Assessment Services (SAS) @ REX.

LEGEND

AMK Ang Mo Kio	BDK Bedok	BJ8 Bishan	CCK Chua Chu Kang
CTP Chinatown Point	JPT Jurong Point	PWP Parkway Parade	QTN Queenstown
REX Rex House	SKG Sengkang	TPN Tampines	WDL Woodlands

YSH Yishun

SRN Serangoon