

CONTACT DETAILS

Name & Signature: _____ Tel: _____

Relationship to child: _____ Email: _____

2

FOR EDUCATIONAL THERAPIST

Name of Ed T: _____

Student's current MLP Class Day: _____ Time: _____

Day: _____ Time: _____

Comments on student's ability, needs and behaviour:

3

BURSARY APPLICATION

Please indicate if you will be applying for a bursary. YES NO

Please note and tick:

1. The bursary is ONLY applicable for current MLP students.
2. The bursary is available for ONE programme. Additional bursary can ONLY be applied for SDA programme.
3. 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.

FOR OFFICIAL USE ONLY

Current MLP bursary percentage

100%	90%	70%	50%	33%
MATHS	PREP 2 PSLE	CHIN	SDA	SLT

Existing SES 3rd Hour Programme YES NO

% Awarded _____ Start Date _____

APPROVED _____ REJECTED _____

Authorised by : _____

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

REMARKS:

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	SRN Serangoon	TPN Tampines
WDL Woodlands	YSH Yishun		

PREP 2 PSLE Programme

SUPPLEMENTARY FORM

This form should be completed by **parents** only.

Kindly note:

1. The Prep 2 PSLE (Preparation for English Paper 2 PSLE) programme is for Primary school students with dyslexia diagnosis from Primary 3 to 6 only.
2. Primary 5 and 6 students who are in either Standard or Foundation streams are eligible.
3. Students must have attained a **minimum score of 35%** in their most recent school English Exam paper.
4. Students in MOE attending **School-Based Dyslexia Remediation (SBDR) programme** who meet the above criteria are eligible.
5. For **“Non-DAS students”**, kindly provide a copy of any of the following:
 - a. Child’s psychological report (Dyslexia diagnosis)
 - b. School-Based Dyslexia Remediation (SBDR) Enrolment letter

FOR PARENTS

Please provide details of your child’s English school results.

ENGLISH	Last year		This year	
	Mid-Year	End of Year	Mid-Year	End of Year
Paper 1				
Paper 2				

Prep 2 PSLE classes are available only at the following centres. Please choose 1 preferred learning centre.

- | | | | | | |
|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|
| <input type="checkbox"/> BDK | <input type="checkbox"/> BJ8 | <input type="checkbox"/> CCK | <input type="checkbox"/> CTP | <input type="checkbox"/> JPT | <input type="checkbox"/> PWP |
| <input type="checkbox"/> QTN | <input type="checkbox"/> REX | <input type="checkbox"/> TPN | <input type="checkbox"/> WDL | <input type="checkbox"/> SKG | <input type="checkbox"/> SRN |