

## REPEAT STUDENT PROGRAMME 2016 REGISTRATION FORM

\*\*ALL FORMS TO BE FILLED IN, PRINTED AND SUBMITTED *IN PERSON* TO 112 MIDDLE ROAD, #02-01 MIDLAND HOUSE BY **12TH MAY, THURSDAY, 5PM**  
**OFFICE OPENING HOURS:** MONDAY- FRIDAY FROM 10AM-7PM & SATURDAY 9AM-1PM  
 IF YOU HAVE ANY FURTHER QUERIES, PLEASE EMAIL [TZELIN@THETHOUGHTCOLLECTIVE.COM.SG](mailto:TZELIN@THETHOUGHTCOLLECTIVE.COM.SG)

### A. PERSONAL DETAILS

|                                    |  |
|------------------------------------|--|
| FULL NAME [ MR/MISS ]              |  |
| HOME ADDRESS                       |  |
| POSTAL CODE                        |  |
| HOME TELEPHONE NUMBER              |  |
| NRIC/PASSPORT NUMBER               |  |
| MOBILE PHONE NUMBER                |  |
| DATE OF BIRTH (DD/MM/YYYY)         |  |
| EMAIL ADDRESS                      |  |
| NATIONALITY                        |  |
| JUNIOR COLLEGE/ POLYTECHNIC        |  |
| COURSE (ONLY APPLICABLE FOR POLY*) |  |

### B. PARENT/GUARDIAN DETAILS

|                                 |  |                  |  |
|---------------------------------|--|------------------|--|
| FULL NAME [AS IN PASSPORT/NRIC] |  |                  |  |
| RELATIONSHIP                    |  |                  |  |
| MOBILE PHONE NO.                |  | OFFICE PHONE NO. |  |
| EMAIL                           |  |                  |  |

### C. EXAMINATION HISTORY

|   |   |  |        |
|---|---|--|--------|
| HOW MANY TIMES HAVE YOU TAKEN YOUR 'A' LEVELS                                     | THIS IS MY FIRST TIME RETAKING            |  |        |
|   | THIS IS MY SECOND TIME RETAKING           |  |        |
|   | I HAVE RETOOK MY 'A'S THREE TIMES OR MORE |  |        |
| WHEN DID YOU LAST TAKE YOUR 'A' LEVELS? (CIRCLE ONE) ▶                            | 2012 / 2013 / 2014 / 2015                 | HAVE YOU STUDIED THE 'A' LEVEL CURRICULUM BEFORE? (CIRCLE ONE) ▶ | YES/NO |
| WHICH WERE THE SUBJECTS YOU TOOK IN YOUR PREVIOUS YEAR, AND WHAT WERE YOUR SCORES | SUBJECT ▼                                 | [H1/H2]  | SCORE  |
|   |   |  |        |
|   |   |  |        |
|   |   |  |        |
|   |   |  |        |

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### D. EXAMINATION DETAILS

| WHICH ARE THE SUBJECTS YOU ARE RETAKING THIS YEAR | SUBJECT ▼ | [H1/H2] ▼ |
|---|-----------|-----------|
|   |           |           |
|   |           |           |
|   |           |           |
|   |           |           |
|   |           |           |

### I HEREBY DECLARE THAT THE INFORMATION PROVIDED IN THIS APPLICATION IS CORRECT AND COMPLETE. I HAVE READ AND AGREED TO :

- 1) ABIDE BY THE TERMS AND CONDITIONS AS STATED IN THE FOLLOWING PAGE (PAGE 3)
- 2) AVOID REPLICATING AND TRANSMITTING ANY PART OF THE COURSE CONTENT IN ANY FORM WHATSOEVER, INCLUDING, BUT NOT LIMITED TO EMAIL, PHOTOCOPYING AND SCANNING
- 3) BE RESPONSIBLE FOR MY ATTENDANCE IN ALL CLASSES, VOLUNTEERING SESSIONS AND COACHING SESSIONS AT THE AGREED TIME AND PLACE SPECIFIED
- 4) REALISE THAT IN THE EVENT I AM NOT ABLE TO MAKE A SCHEDULED CLASS, IT IS MY RESPONSIBILITY TO REARRANGE FOR A MAKE-UP WITH THE TEACHER-IN-CHARGE, AND THAT IT IS UP TO THE TEACHER'S DISCRETION WHETHER OR NOT THERE WILL BE A MAKE-UP LESSON
- 5) KEEP MY PARENT/GUARDIAN INFORMED OF THE CLASS SCHEDULE AND PAYMENT OF ALL FEES

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF PARENT/GUARDIAN

\_\_\_\_\_  
DATE

### WHICH PROGRAMME WOULD YOU LIKE TO APPLY FOR?

#### FINANCIAL AID SCHEME

1

**NORMAL PROGRAMME**  
(I.E. \$900 + GST / MONTH)

2

**TIER 1**  
(I.E. \$600 + GST / MONTH)

3

**TIER 2**  
(I.E. \$300 + GST / MONTH)

<sup>7</sup>  
2

### FOR OFFICIAL USE

DATE COLLECTED:

1ST INTAKE/2ND INTAKE:

FEE TO PAY:

PAYMENT MODE: CASH/NETS/CHEQUE

DATE PAID:

ATTENDED BY:

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### TERMS AND CONDITIONS

#### 1. REGISTRATION

1.1 ALL ENTRIES IN REGISTRATION FORM MUST BE COMPLETED FOR IT TO BE VALID

#### 2. GST

2.1 GST IS CHARGED AT A PREVAILING RATE OF 7%

#### 3. FEES

3.1 THE COURSE FEES ARE AS FOLLOWS

\$900/MONTH

INCLUSIVE OF:

TUITION FOR 5 SUBJECTS, 2 HOURS/SUBJECT PER WEEK,

12 X 2 HOUR COACHING SESSIONS

ONCE-OFF SEL WORKSHOP (3 DAYS)

3.2 EACH LESSON IS 2 HOURS LONG (EXCEPT FOR LITERATURE WHICH IS BETWEEN 2.5-3HOURS LONG)

3.3 STUDENTS MAY BE REQUIRED TO PURCHASE SUPPLEMENTARY MATERIALS

#### 4. PAYMENT INFORMATION

4.1 PAYMENT CAN BE MADE BY NETS, CASH OR CHEQUE

4.2 CHEQUES SHOULD BE CROSSED AND MADE PAYABLE TO 'SCHOOL OF THOUGHT LEARNING CENTRE PTE LTD'. PLEASE WRITE THE STUDENT'S FULL NAME, NRIC/BIRTH CERT NO. AND CONTACT NUMBER ON THE REVERSE SIDE OF THE CHEQUE. POSTDATED CHEQUES ARE NOT ACCEPTED AND WE ARE NOT LIABLE FOR ANY BANK CHARGES INCURRED

4.3 ALL PAYMENT IS TO BE SUBMITTED FOR THE NEXT MONTH BY THE 1ST DAY OF THE MONTH (EG. THE PAYMENT FOR JUNE 2016 HAS TO BE IN BY 1ST JUNE 2016)

4.3 ANY RETURNED CHEQUE DUE TO THE DRAWER'S FAULT WILL INCUR AN ADMINISTRATION FEE OF \$10

4.4 FAILURE TO MAKE PAYMENTS WITHIN 30 DAYS WILL RESULT IN THE IMPOSITION OF A \$10 LATE FEE

#### 5. WITHDRAWAL

5.1 STUDENTS WHO WISH TO WITHDRAW FROM THE PROGRAMME ARE REQUIRED TO GIVE ONE MONTH'S NOTICE IN WRITING, VIA EMAIL OR WRITTEN FORM.

5.2 VERBAL NOTICE WILL NOT BE ACCEPTED AS A FORM OF WITHDRAWAL

#### 6. PUBLIC/SCHOOL HOLIDAYS

6.1 NO LESSONS ARE CONDUCTED ON PUBLIC HOLIDAYS

6.2 LESSONS ARE CONDUCTED DURING SCHOOL HOLIDAYS

#### 7. VOLUNTEERING, MISSED LESSONS AND COACHING SESSIONS

7.1 IF A STUDENT MISSES A SCHEDULED LESSON, THEY MUST BE RESPONSIBLE TO SCHEDULE A MAKE-UP LESSON WITHIN THE WEEK WITH THEIR SUBJECT TEACHER. IT IS UP TO THE DISCRETION OF THE SUBJECT TUTOR'S AS TO WHETHER OR NOT THEY WILL BE GIVEN A MAKE-UP LESSON

7.2 THERE ARE NO REFUNDS FOR MISSED LESSONS UNDER THE REPEAT STUDENT PROGRAMME

7.3 IT IS COMPULSORY FOR ALL STUDENTS TO ATTEND SEL TRAINING AS WELL AS EVERY COACHING SESSION

7.3 IN THE EVENT THAT STUDENTS OF THE REPEAT STUDENT PROGRAMME MISS MORE THAN 10 LESSONS AND/OR COACHING SESSION, THEIR PLACE WITHIN THE PROGRAMME WILL BE REVIEWED

7.4 IN ORDER TO STAY IN THE REPEAT STUDENT PROGRAMME, STUDENTS MUST FULFIL 4 HOURS OF VOLUNTEERING MONTHLY

#### 8. MISCELLANEOUS

8.1 SOT WILL TAKE ALL NECESSARY PRECAUTIONS TO SAFEGUARD THE WELL-BEING OF STUDENTS WITHIN ITS PREMISES, SOT WILL NOT BE HELD RESPONSIBLE OR ANSWERABLE FOR ANY INCIDENTS OR MISHAPS THAT MAY OCCUR WITHIN OR OUTSIDE ITS PREMISES

8.2 PARENTS ARE TO REFRAIN FROM APPROACHING SOT TUTORS OR STAFF FOR PRIVATE LESSONS- THIS IS A SERIOUS VIOLATION OF SOT'S POLICY

8.3 IN THE EVENT THAT A TUTOR IS UNABLE TO CONDUCT A LESSON, THE TUTOR RESERVES THE RIGHT TO APPOINT A RELIEF TUTOR OR RE-SCHEDULE THE LESSON

**YOU CAN APPLY FOR FINANCIAL AID AS LONG AS YOU:**

- (a) ARE FROM A FAMILY WITH NEEDY CIRCUMSTANCES
- (b) HAVE A COMBINED HOUSEHOLD INCOME OF LESS THAN \$3,000
- (c) HAVE BEEN CUT OFF FINANCIALLY FROM YOUR PARENTS

## **FINANCIAL APPLICATION FORM FOR REPEAT STUDENT PROGRAMME 2016**

### **SUBMISSION OF FINANCIAL AID APPLICATION**

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### **DECLARATION OF FINANCIAL POSITION**

**IMPORTANT**

[1] ALL INFORMATION REGARDING SALARY OF INCOME OF ANY FORM, CLAIMED ALLOWANCES AND EMPLOYMENT IN THIS SECTION MUST BE SUPPORTED BY OFFICIAL DOCUMENTARY EVIDENCE, I.E. LATEST PAY SLIP/ CPF CONTRIBUTION FOR THE LAST 12 MONTHS/ INCOME TAX SETTLEMENT/ PROOF OF SIBLINGS STUDYING/ SCHOLARSHIP/ BURSARY AWARDS / ANY RELATED DOCUMENTS

[2] INFORMATION PROVIDED MUST INCLUDE ALL IMMEDIATE FAMILY MEMBERS I.E. PARENTS/ GUARDIANS, BROTHERS, SISTERS [INCLUDING THOSE MARRIED]

[3] PHOTOCOPY OF NRIC/ BIRTH CERTIFICATE OF ALL FAMILY MEMBERS STAYING IN THE SAME RESIDENCE ADDRESS

PLEASE KINDLY NOTE THAT INCOMPLETE OR UNOFFICIAL DOCUMENTARY PROOF WILL NOT BE ACCEPTED.

### **A. FINANCIAL POSITION**

| <b>NAMES OF IMMEDIATE FAMILY MEMBERS CONTRIBUTING TO FAMILY INCOME BOTH STAYING AND NOT STAYING IN THE SAME HOUSEHOLD</b> | <b>RELATIONSHIP TO APPLICANT</b> | <b>AGE</b> | <b>MARITAL STATUS</b> | <b>OCCUPATION/ BUSINESS</b> | <b>NAME OF EMPLOYER [STATE IF SELF-EMPLOYED]</b> | <b>GROSS MONTHLY INCOME FROM ALL SOURCES INCLUDING SALARY, RENT, PENSION, ETC</b> | <b>AMOUNT CONTRIBUTED TO FAMILY</b> |
|---|----------------------------------|------------|-----------------------|-----------------------------|--|---|-------------------------------------|
|   | FATHER/MOTHER                    |            |                       |                             |  |   |                                     |
|   |                                  |            |                       |                             |  |   |                                     |
|   |                                  |            |                       |                             |  |   |                                     |
|   |                                  |            |                       |                             |  |   |                                     |
|   |                                  |            |                       |                             |  |   |                                     |
|   |                                  |            |                       |                             |  |   |                                     |

### **B. DECLARATION OF DEPENDENTS**

| <b>NAMES OF DEPENDENTS</b> | <b>RELATIONSHIP TO APPLICANT</b> | <b>AGE</b> | <b>REASONS FOR UNEMPLOYMENT</b> | <b>IF STUDYING</b>          |                                    |
|----------------------------|----------------------------------|------------|---------------------------------|-----------------------------|------------------------------------|
|                            |                                  |            |                                 | <b>SCHOOL/LEVEL/ COURSE</b> | <b>SCHOLARSHIP/ BURSARY IF ANY</b> |
|                            |                                  |            |                                 |                             |                                    |
|                            |                                  |            |                                 |                             |                                    |

# **FINANCIAL APPLICATION FORM FOR REPEAT STUDENT PROGRAMME 2016**

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## **C. OTHER FINANCIAL INFORMATION**

### **TYPE OF HOUSING**

- 1 ROOM FLAT/ 2 ROOM FLAT
- 3 ROOM FLAT/ 4 ROOM FLAT
- 5 ROOM FLAT/ EXECUTIVE/ CONDOMINIUM
- BUNGALOW/ SEMI-DETACHED/ TERRACE HOUSE/ HUDC

### **HOUSING OWNERSHIP**

- FULL OWNERSHIP
- PAYING/HOUSING LOAN BY MONTHLY INSTALMENTS
- RENTED

## **D. ESSAY**

*WRITE AN ESSAY OR EXPLANATION OF NOT MORE THAN 300 WORDS DESCRIBING THE REASONS OR RELEVANT BACKGROUND INFORMATION THAT MAY BE HELPFUL FOR YOUR FINANCIAL AID APPLICATION*

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## **E. DECLARATION**

I HEREBY DECLARE THAT THE INFORMATION PROVIDED IN THIS APPLICATION IS CORRECT AND COMPLETE. I UNDERSTAND THAT ANY PROVISION OF INACCURATE OR FALSE INFORMATION OF INFORMATION WILL RENDER THIS APPLICATION INVALID AND THAT, IF SELECTED ON THE BASIS OF SUCH INFORMATION, I CAN BE REQUIRED TO WITHDRAW FROM THE FINANCIAL AID PROGRAMS WITH IMMEDIATE EFFECT. I HAVE ALSO READ AND AGREED TO ALL THE TERMS AND CONDITIONS OF THE REPEAT STUDENT PROGRAMME FINANCIAL ASSISTANCE SCHEME.

I UNDERSTAND THAT UNDER THE REPEAT STUDENT PROGRAMME FINANCIAL ASSISTANCE SCHEME, THERE WILL NOT BE ANY REFUND FOR ANY MISSED LESSONS.

APPLICANTS ARE REQUIRED TO INFORM SOT IN CASE OF ANY CHANGE IN THEIR FAMILY INCOME OR FINANCIAL STATUS IMMEDIATELY.

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**SIGNATURE OF APPLICANT**

---

**DATE**

---

**SIGNATURE OF PARENT/GUARDIAN**

---

**DATE**