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application number

DIRECT SCHOOL ADMISSION – SECONDARY
ST. JOSEPH’S INSTITUTION DSA APPLICATION

Photo

Name of Applicant: _____
 (as in **Birth Certificate**)

Birth Cert. No/FIN: _____

Nationality: _____

Religion: _____

Primary School: _____

Mother Tongue: _____

Tel. No: _____ Parent’s Handphone No: _____

Address: _____

Email Address: _____

DSA Area to be considered: _____

Results of Pr 5 & 6 Examinations	English	MTL	Math	Science	Overall %	Conduct
Primary 5 End-of-Year Exam						
Primary 6 Mid-Year Exam						

 Name of Parent/Guardian NRIC/Passport No. Signature Date

(Please submit certified true copies of documents that will support the details of academic and CCA achievements: photocopies of last two years’ school exam results, certificates of CCA achievements.) APPLICATION FORM & SUPPORTING DOCUMENTS MUST BE SUBMITTED IN PERSON TO THE SCHOOL OFFICE BY 28 JUNE.



CCA ACHIEVEMENTS (Primary 5 & 6)

Name of Applicant: _____

Birth Cert. No/FIN: _____

National/Zone Inter-school Championship for DSA Sports	Achievement (when in Primary 6)
National/Zone Inter-school Championship for DSA Sports	Achievement (when in Primary 5)
National Age Group Championship for DSA Sports	Achievement (when in Primary 6)
National Age Group Championship for DSA Sports	Achievement (when in Primary 5)
For DSA Band ONLY (Please state the instrument you play)	Achievement over the years
For DSA Chess ONLY (Please state Competitions)	Achievement over the years

I have been selected for national representation in the above sport. (If Yes, please specify)

Verified by:

Name of Principal/HOD of Primary School: _____

Name of Primary School: _____

Signature of Principal/HOD of Primary School: _____ Date: _____

(Please submit certified true copies of documents that will support the details of academic and CCA achievements: photocopies of last two years' school exam results, certificates of CCA achievements.) APPLICATION FORM & SUPPORTING DOCUMENTS MUST BE SUBMITTED IN PERSON TO THE SCHOOL OFFICE BY 28 JUNE.