TIC TRUE Learning Centre

Reg. No. _____

Application Form

IBDP

Branch ☐ Jurong ☐ Kovan ☐ Novena

JC 1/ 2/ 3* 20____ ☐ HL Math ☐ SL Math

STUDENT DETAILS

Full Name as in NRIC/Passport (*Please underline family name*)	NRIC/Passport No	Gender ☐ M ☐ F
Date of Birth (DD/MM/YYYY) Nationality ☐ Singaporean ☐ Singaporean PR ☐ Others ……		
Home Address Postal Code		
Home Telephone Number	Student Mobile Number	
Student Email address		
School		

PARENT DETAILS

Preferred contact ☐ Mother ☐ Father ☐ Others …….. Guardian / Grandfather / Grandmother

Father	Mother
Title ☐ Mr ☐ Dr	Title ☐ Ms ☐ Mrs ☐ Mdm ☐ Dr
Name	Name
Contact Mobile Office	Contact Mobile Office
Email	Email
Company	Company
Designation	Designation

LATEST SCHOOL RESULTS

HL Math …… SL Math ……

GCE 'O' level / Sec 4 Results E.Math …… A.Math …… IP Math ……

HOW DO YOU KNOW US? ☐ NEWSPAPERS ☐ FLYERS ☐ MAGAZINES ☐ SEARCH ENGINE ☐ INTERNET FORUM ☐ STREET DIRECTORY (ONLINE) ☐ FRIENDS: _____ ☐ OTHERS : _____

For Official Use

Subject	Class Code	Day	Time	Start Date

Date of registration: _____ Receipt Number: _____ Payment: _____

Remarks: _____