



**Ahmad Ibrahim Secondary School  
Direct School Admission- Secondary  
DSA Application Form**

Date received	
Reference	

For official use only

Name of Candidate : \_\_\_\_\_

BC No./ FIN/ Passport No.\* : \_\_\_\_\_

Date of Birth : \_\_\_\_\_

Nationality : \_\_\_\_\_

Gender : Male / Female\*

Primary School : \_\_\_\_\_

Mother Tongue : Chinese/Malay/Tamil/Others/ Exempted \*

Contact No. : \_\_\_\_\_

Address : \_\_\_\_\_

\_\_\_\_\_

Email Address : \_\_\_\_\_

\_\_\_\_\_  
Name of Parent/Guardian\*      NRIC/Passport No.      Signature      Date

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**Note:**

Please submit the application form by post or fax (6755 7778) to the school by **30<sup>th</sup> June 2009**.

If you do not hear from us 1 week after the submission of your application form, please give us a call at Tel: 6758 5384.

**Acknowledgement Slip**

Reference No.	
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Dear Parent/ Guardian,

We are pleased to keep you informed that we have received your child's/ward's, \_\_\_\_\_ DSA application form dated \_\_\_\_\_.

He/ She is required to attend the selection trial on the \_\_\_\_\_ at \_\_\_\_\_ a.m / p.m.

Please bring along his/her EC / EZ-link card for identification purposes, be dressed in T-shirt and shorts, and go to the General Office for registration. Thank you.

\_\_\_\_\_  
Name & Signature of DSA Co-coordinator      Contact No      Date

**Note:**

Dates for selection trial are Friday 24/7/2009 and 31/7/2009 from 1:30 to 4:30 pm. The venue will be at Ahmad Ibrahim Secondary School(Shooting range).