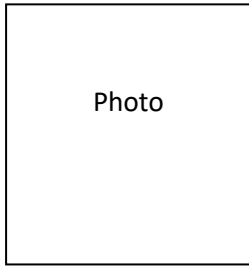




# Early Childhood Care and Education Authority



Serial:

## Application form Registration of Manager

**Registration period January 2023- December 2024**

1. Name of School : \_\_\_\_\_

2. Name of registered Manager: \_\_\_\_\_

3. Is there a change in Manager: Yes  No

4. If (yes), Name of new Manager: : \_\_\_\_\_

5. Date new Manager joined: \_\_\_\_\_

**-----This part onwards information to be filled for registered Manager or new Manager-----**

6. Title : \_\_\_\_\_

7. Address of Manager : \_\_\_\_\_

8. Phone /fax number : \_\_\_\_\_

9. Date of birth : \_\_\_\_\_

10. Gender : \_\_\_\_\_

11. Nationality : \_\_\_\_\_

12. Work permit( *if applicable*) : \_\_\_\_\_

13. National ID No. : \_\_\_\_\_

14. Address –Home : \_\_\_\_\_

15 Phone (home) : \_\_\_\_\_

16. Email address : \_\_\_\_\_

**17. Academic qualifications**

Qualification (SC 'O' Level or GCE 'O' Level)		Qualification (SC 'O' Level or GCE 'O' Level)	
Specify: .....		Specify: .....	
Year: .....		Year: .....	
Subject	Grade	Subject	Grade

Qualification (HSC 'A' Level or GCE 'A' Level)		Qualification (HSC 'A' Level or GCE 'A' Level)	
Specify: .....		Specify: .....	
Year: .....		Year: .....	
Subject	Grade	Subject	Grade

**18. Professional Qualifications**

Institution	Certificate awarded	Dates/year

**Statement of Manager**

I ..... certify that the information given on this form is true, complete and correct to the best of my knowledge

Signature of Manager: \_\_\_\_\_

Date: \_\_\_\_\_

**FOR OFFICIAL USE**

The following documents have been produced checked and returned

1	Birth Certificate		6	Professional Certificate	
2	Medical Certificate ( <i>Private</i> )		7	Educational Certificate	
3	Medical Certificate ( <i>GMO</i> )		8	Morality Certificate	
4	Identity Card		9	Letter of appointment as Manager from owner of school ( <i>if employed</i> ) if applicable	
5	Work permit ( <i>if applicable</i> )		10	Civil marriage certificate	

I, ..... Assistant Coordinator certify having verified the above information and hereby recommend / not recommend the registration of the applicant

Reasons if application is not recommended: .....

.....

Signature of Assistant Coordinator: ..... Date: .....

I, Mrs. .... Assistant Coordinator certify having verified the above information and recommend /do not recommend the registration of the applicant

Reasons for not recommended ( if applicable): .....

Signature of Assistant Coordinator:..... Date: .....

**Remarks from Coordinator**

**Remarks**

.....  
 .....  
 .....  
 .....

Signature of Coordinator:..... Date: .....

**Note for managers**

Under the new regulations of 2011, all pre-primary school shall be at all times administered by a full-time manager.