



# Early Childhood Care and Education Authority

**Serial:**

Photo

## Application form Registration of Teacher

**Year: January 2025 –December 2026**

- 1. Name of School: \_\_\_\_\_
- 2. Address (School) \_\_\_\_\_
- 3. Name of Teacher \_\_\_\_\_
- 4. Title (Mr., Mrs, Ms.) \_\_\_\_\_
- 5. Date joined \_\_\_\_\_
- 6. Phone number \_\_\_\_\_
- 7. Email address \_\_\_\_\_
- 8. Date of birth \_\_\_\_\_ Age: \_\_\_\_\_
- 9. Gender \_\_\_\_\_
- 10. Nationality \_\_\_\_\_
- 11. Work permit if (applicable) \_\_\_\_\_
- 12. National ID No. \_\_\_\_\_
- 13. Address –Home \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## 14. 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

## 14. Professional Qualifications

Institution	Certificate awarded	Dates/Year

**15. Any other qualifications**

Institution	Certificate awarded	Dates/Year

**16. Record of service in pre-school sector**

Name of pre-school Institution	FROM (year)	TO (year)	Position held

**17. Present employment**

Self employed	
Employed by an individual	
Employed by an organization	
Name of employer: (if applicable)	
Monthly salary:	
Contribution to NPS (where applicable):	

**18. Applicable for Pre-primary School in the GIA Scheme Only**

Bank Account Number	
Name of Bank	
Branch	

**19. Statement from Manager**

I ....., Manager of ..... hereby certify to the correctness of the information provided in this application form.

Signature of Manager: .....

Date: .....

**Statement of Teacher**

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