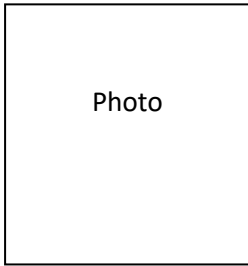




Early Childhood Care and Education Authority



Serial:

Application form Registration of Assistant Manager

Registration period January 2025 - December 2026

1. Name of School : _____
2. Name of registered Manager: _____
3. Name of new Assistant Manager: : _____
4. Date new Assistant Manager joined: _____
5. Title : _____
6. Address of Assistant Manager : _____
7. Phone /fax number : _____
8. Date of birth : _____ Age: _____
9. Nationality : _____
10. Work permit(*if applicable*) : _____
11. National ID No. : _____
12. Address –Home : _____
13. Phone (home) : _____
14. Email address : _____

15. 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

16. 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: