

## Early Childhood Care and Education Authority

Serial:		

Photo

## Application form Registration of Assistant Manager

Registration period January 2025 - December 2026

1.Name of School	:	 	
2.Name of registered Mana	ger:	 	
3 Name of new Assistant M	anager: :	 	
4. Date new Assistant Mana	ager joined:		
5. Title (Mr., Mrs., Ms.)	:		
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. Acad	lemic o	ıualifica	tions
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Qualification (SC 'O' Level or GC	E 'O' Level)	Qualification (SC 'O' I	Level or GCE 'O' Level
Specify:		Specify:	
Year:		Year:	
Subject	Grade	Subject	Gra
Qualification (HSC 'A' Level or GO	CE 'A' Level)	Qualification (HSC 'A'	Level or GCE 'A' Leve
Specify:		Specify:	
Year:		Year:	
Subject	Grade	Subject	Gra
6. Professional Qualification	ons		
Institution	Certif	icate awarded	Dates/year
17. Applicable for Pre-Primary Sc	thool in the GLA	A Scheme Only	
17. Applicable for Pre-Primary Sc Bank Account Number	thool in the GLA	A Scheme Only	
	hool in the GL	A Scheme Only	

I	
	certify to the correctness of
the information provided in this application form.	Seal of School
Signature of Manager:	
Date:	
Statement of Assistant Manager	
Statement of Assistant Manager  I  Manager of  correctness of the information provided in this application form.	
IManager of	hereby certify to the

Date: .....