## SALEM–Immanuel Lutheran College Career and Life Planning Grant Application Form (2018-2019)

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I would like to apply for the Career and Life Planning Grant. My child's particulars and the details of the activity that my child has taken are as follows.

Name:	Class:	Class No.:	
Title of activity			
Activity organized by			
Date of activity			
Amount of Fee			
Teacher who are responsible for the activ	rity		
Signature of the teacher			
(Please ✓ the appropriate box or boxes.)			
<ul><li>(1)  I would like to apply for the Caree</li><li>(2) I receive one of the following subsidie</li></ul>		ing Grant.	
<ul> <li>☐ Comprehensive Social Security A</li> <li>☐ Full Paid from Book Subsidy Sch</li> <li>☐ Half Paid from Book Subsidy Sch</li> </ul>	ssistance eme eme esidies stated abo	ove. However, my family is facing financia	
(Recommended by the class teac			
Name of parent:	_		
Parent's contact number:	Date	Date of application:	
(Please submit your application to Ms To by 11 <sup>th</sup> July, 2019. Applicants who can before the deadline for application can a The result will be released by 27 <sup>th</sup> Septen	not submit rece apply from 3 <sup>rd</sup> S	eptember, 2019 to 6 <sup>th</sup> September, 2019.	
☐ Application approved, approved amou	unt \$	Approved by:	
Reason:			
<ul><li>☐ Basic subsidy</li><li>☐ Comprehensive Social Security Assist</li></ul>	tance	Signature:	
<ul> <li>☐ Full Paid from Book Subsidy Scheme</li> <li>☐ Half Paid from Book Subsidy Scheme</li> <li>☐ Others:</li></ul>		Date of approval:	
☐ Application not approved Reason:			