



**ST. HILDA'S SECONDARY SCHOOL**  
**APPLICATION FOR TRANSFER, YEAR: \_\_\_\_\_**

**FORM B**

REG. NO. : _____
Attended By: _____

<b>Level: Sec 2 / 3</b>				<input type="checkbox"/> Express	<input type="checkbox"/> Normal Academic	<input type="checkbox"/> Normal Technical	(Pls ✓)
Student's Name (as in Passport or Birth Cert.)				Birth Cert. / NRIC / Identification No.:			
Gender: Male / Female				Nationality: Singapore / PR / Foreigner			
Date of Birth:				Expiry Date of Student Pass:			
<b>Current / Last School Attended:</b>							
<b>Pupil's Latest Results:</b>							
• English:		• Maths:		• MT (CL/ML/TL/Others):			
<b>Reason(s) for Seeking Transfer:</b>							

**Parent's Particulars:**

Name of Parent / Guardian:		Address:	
I/C or Passport No.:			
Tel No. _____	H/P No: _____	Email Address: _____	

\_\_\_\_\_  
 Parent / Guardian's Signature Date

<b>For Official Use:</b>		
Result : <b>YES / NO</b>	Class Admitted To:	Stream:
Principal's Signature		Date

REG. NO. : _____
Attended By: _____

Dear Applicant

- Please note the following
1. We will contact you, only if your child is shortlisted for admission.
  2. Vacancy is **NOT** allocated based on first-come-first-serve basis. Our school's guidelines for transfer consideration are based on proximity of pupil's home to the school, pupil's overall academic performance etc. Kindly note that Management's decision is final.
  3. Please attach copies of latest result slips for submission.
  4. Thank you for your interest in St. Hilda's Secondary School. Our Tel 63055277 or Fax 67865011