

STUDENT CARE FEE ASSISTANCE (SCFA) SCHEME
APPLICATION FORM FOR SCFA SUBSIDY AND/OR THE START UP GRANT

I am applying for:-

- The SCFA Subsidy (New / Renewal)* and/or*
 - The Start Up Grant ("SUG") (New enrolment / Appeal for another SUG / Re-application due to Transfer)*
- (*delete where appropriate)

The SCFA Scheme provides fee assistance for children from lower-income working¹ families who enrol in SCFA Administrator Student Care Centres (SCCs). Under the SCFA Scheme, successful applicants are provided a monthly Subsidy and SUG (if eligible) which MSF disburses directly to the SCC. The SCC deducts the Subsidy against the SCC monthly fees. The amount of the Subsidy is determined based on the monthly gross household/per capita income of the family. With effect from **1 January 2016**, families with a gross Household Income of up to \$4,000, or a gross Per Capita Income of up to \$1,000 (for families with five or more family members) are eligible to apply for the Subsidy.

- For new applications, this form must be submitted with a complete set of supporting documents upon admission to the SCC.
- For renewal applications, this form must be submitted with a complete set of supporting documents 2 months prior to expiry of subsidy.
- Only applications which are submitted with a complete set of documents will be processed.

SECTION I: PARTICULARS OF CHILD

Name of Child (as in Birth Certificate) :		Birth Certificate No. :
		Citizenship of Child: <input type="checkbox"/> Singapore Citizen (SC) <input type="checkbox"/> Permanent Resident of Singapore (PR) ² . The following family member of the child is a SC. <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Sibling
Date of Birth:	Age of Child (as at Date of Application):	Current Level of Education:
Name of Primary School:		

SECTION II: PARTICULARS OF MAIN APPLICANT	SECTION III: PARTICULARS OF SPOUSE
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Name (as in NRIC / FIN):	Name (as in NRIC / FIN):
NRIC / FIN No:	NRIC / FIN No:
Citizenship : <input type="checkbox"/> SC <input type="checkbox"/> Singapore PR <input type="checkbox"/> Foreigner	Citizenship : <input type="checkbox"/> SC <input type="checkbox"/> Singapore PR <input type="checkbox"/> Foreigner
Relationship to Child:	Relationship to Child:

Address (as in NRIC / FIN):

Correspondence Address (if different from NRIC):

¹If either parent/legal guardian is not working, he or she must be looking for work, on medical leave, incarcerated, a certified full-time caregiver for a dependent, or have other valid reasons. The applicant must provide relevant supporting documents

² A child issued with an Entry Permit (EP) or Re-entry Permit (REP) will be considered a PR. A child born before 15 January 2005 may be considered a PR if he does not hold an EP or REP, but is allowed to reside in Singapore without being placed on restricted stay. To verify if your child qualifies as a PR, please check with the Permanent Residence Services Centre of the Immigration and Checkpoints Authority of Singapore.

Contact No :
 (H) _____ (O) _____ (HP) _____

<p>Employment Status of Main Applicant:</p> <input type="checkbox"/> Employed (working at least 56 hours per month) <input type="checkbox"/> Looking for work <input type="checkbox"/> Not working (Retiree) <input type="checkbox"/> Not working (Student) <input type="checkbox"/> Not working (Permanently medically unfit for work) <input type="checkbox"/> Not working (Temporarily medically unfit for work (Less than or equal to 3 months)) <input type="checkbox"/> Not working (Temporarily medically unfit for work (More than 3 months)) <input type="checkbox"/> Caregiver for elderly parent(s) <input type="checkbox"/> Undergoing training <input type="checkbox"/> Self-employed <input type="checkbox"/> Serving NS <input type="checkbox"/> Other, please specify: _____	<p>Employment Status of Spouse:</p> <input type="checkbox"/> Employed (working at least 56 hours per month) <input type="checkbox"/> Looking for work <input type="checkbox"/> Not working (Retiree) <input type="checkbox"/> Not working (Student) <input type="checkbox"/> Not working (Permanently medically unfit for work) <input type="checkbox"/> Not working (Temporarily medically unfit for work (Less than or equal to 3 months)) <input type="checkbox"/> Not working (Temporarily medically unfit for work (More than 3 months)) <input type="checkbox"/> Caregiver for elderly parent(s) <input type="checkbox"/> Undergoing training <input type="checkbox"/> Self-employed <input type="checkbox"/> Serving NS <input type="checkbox"/> Other, please specify: _____
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<p>Marital Status:</p> <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Divorced	<p>Type of Accommodation</p> <input type="checkbox"/> HDB 1/2/3/4/5-rm <input type="checkbox"/> HDB Exec <input type="checkbox"/> HHD Studio Apartment <input type="checkbox"/> Condominium/Private Apartment <input type="checkbox"/> Landed Property <input type="checkbox"/> Crisis Shelter <input type="checkbox"/> Transitional Shelter <input type="checkbox"/> Institution <input type="checkbox"/> Homeless <input type="checkbox"/> Others: _____	<p>Accommodation Status:</p> <input type="checkbox"/> Rented <input type="checkbox"/> Purchased <input type="checkbox"/> Living with relatives <input type="checkbox"/> Others: _____
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SECTION IV: PARTICULARS OF IMMEDIATE FAMILY MEMBERS³ LIVING WITH THE MAIN APPLICANT
 (Note: Please only list the Immediate Family Members who are
 (a) not working or do not have any source of income: e.g., great grandparents, grandparents or children and
 (b) living at the same address as the Main Applicant)

	Name of Immediate Family Members (with <u>no</u> income)	Date of Birth	Relationship to Child receiving the Subsidy	Employment Status (retired/ unemployed/ undergoing training/ looking for work/ serving NS/ schooling)
1				
2				
3				
4				
5				
6				
7				
8				

³ "Immediate Family member" refers to anyone related to the Applicant by blood, marriage (including step-children and in-laws) or legal adoption.

SECTION V: MONTHLY GROSS HOUSEHOLD INCOME OF MAIN APPLICANT AND SPOUSE

(Note: Gross income refers to income before CPF deduction, inclusive of regular overtime pay, allowances, commissions, incentives)

(A) Monthly Gross Income of Main Applicant	\$
(B) Monthly Gross Income of Spouse	\$
SECTION VI : OTHER INCOME (if applicable)	
Income from rent ⁴	\$
Income from monthly commission earnings ⁵	\$
(C) Total Other Income	\$

⁴ This is income from renting out a room (or rooms) of the family home or other properties.

⁵ Monthly commission earnings are based on the actual amount received per month or on the average earnings per month over 12 months (if the commission earnings are irregular).

SECTION VIIA: CONSENT/DECLARATION BY MAIN APPLICANT (MOTHER/ FATHER/ GUARDIAN)

[Note: Please read the Terms of Consent under Section VIII below before signing this portion]

CONSENT FOR COLLECTION, USE AND SHARING OF DATA FOR THE APPLICATION OR RENEWAL OF APPLICATION FOR THE SUBSIDY AND/OR THE START-UP GRANT

1 I am the parent/legal guardian of the Child (whose Personal Information is set out in Section I above) who is under 21 years of age.

2 I understand that the Government of Singapore (“Government”) and Participating Agencies require my and my Child’s Personal Information for the following purposes:

- (a) to determine my Child’s eligibility for the Subsidy and/or the Start Up Grant (“the Subsidies”);
- (b) to provide my Child with both or any of the Subsidies; and
- (c) for data analysis, evaluation and policy-making.

3 I allow the Government and Participating Agencies to collect, share and use my and my Child’s Personal Information for the purposes in Paragraph 2. I understand that my and my Child’s Personal Information will not be shared with non-participating agencies or organisations.

4 I have read and understood this consent form fully, including the Terms of Consent set out in Section VIII of this Application Form.

5 This consent shall be governed by and construed in accordance with the laws of the Republic of Singapore.

DECLARATION

6 I, the undersigned, declare that I have read and understood the content in Section VIIA of this Application Form. I confirm that the information that I have provided in Sections I, II, III, IV, V, VI is true and correct and I furnish the information knowing that I may be liable to criminal prosecution if I have stated any information that I know to be false or not believe to be true.

7 In the event my application is successful and my Child receives any of the Subsidies which I am applying for, I hereby acknowledge that I may also be liable to make full repayment to the Government of the Subsidies which were provided, should I be found to have provided false or inaccurate information in this form.

OTHER TERMS

8 I understand and agree to the following:-

i. It shall be my responsibility to stay employed⁶ to continue to enjoy the Subsidies for my Child. If I am unemployed and intend to seek employment, the onus is on me to actively seek employment.

ii. (only applicable to applications for the Start-Up Grant) The Start up Grant shall only be given once to my Child, and any subsequent applications shall be assessed and granted only in MSF’s sole discretion.

iii. In order to continue enjoying the relevant monthly Subsidy, I must ensure that my Child attends at least 50% of the number of days in which the SCC operates per month. If my Child does not meet the minimum attendance rate, the Subsidy paid for the relevant month may be refunded to MSF and I am liable to pay the full SCC monthly fee.

iv. I shall provide the SCC with a one-month notice before withdrawing my child/ward from the SCC.

(Signature of Main Applicant)

Name: _____

Date of Consent: _____ **(DD/MM/YYYY)**

⁶ i.e. to be engaged under a contract of service and receive a salary

SECTION VIIB: CONSENT/DECLARATION BY MAIN APPLICANT'S SPOUSE / OTHERS

[Note: Please read the Terms of Consent under Section VIII below before signing this portion]

CONSENT FOR COLLECTION, USE AND SHARING OF DATA FOR THE APPLICATION OR RENEWAL OF APPLICATION FOR THE SUBSIDY AND/OR THE START-UP GRANT

1 I am the Spouse/ _____ of the Main Applicant and my Personal Information is set out in Section III above.

2 I understand that the Government of Singapore ("Government") and Participating Agencies require my Personal Information for the following purposes:

- (a) to determine the Child's eligibility for the Subsidy and/or the Start Up Grant ("the Subsidies");
- (b) to provide the Child with both or any of the Subsidies; and
- (c) for data analysis, evaluation and policy-making.

3 I allow the Government and Participating Agencies to collect, share and use my Personal Information for the purposes in Paragraph 2. I understand that my Personal Information will not be shared with non-participating agencies or organisations.

4 I have read and understood this consent form fully, including the Terms of Consent set out in Section VIII of this Application Form.

5 This consent shall be governed by and construed in accordance with the laws of the Republic of Singapore.

DECLARATION

6 I, the undersigned, declare that I have read and understood the content in Section VIIB of this Application Form. I confirm that the information in Sections I, II, III, IV, V, VI is true and correct and I make this declaration knowing that I may be liable to criminal prosecution if I have stated any information that I know to be false or not believe to be true.

7 In the event my application is successful and the Child receives any of the Subsidies which I am applying for, I hereby acknowledge that I may also be liable to make full repayment to the Government of the Subsidies which were provided, should I be found to have provided false or inaccurate information in this form.

OTHER TERMS

8 I understand and agree to the following:-

i. It shall be my responsibility to stay employed⁷ to continue to enjoy the Subsidies for the Child. If I am unemployed and intend to seek employment, the onus is on me to actively seek employment.

ii. (only applicable to applications for the Start-Up Grant)The Start up Grant shall only be given once to the Child, and any subsequent applications shall be assessed and granted only in MSF's sole discretion.

iii. In order to continue enjoying the relevant monthly Subsidy, I must ensure that the Child attends at least 50% of the number of days in which the SCC operates per month. If my Child does not meet the minimum attendance rate, the Subsidy paid for the relevant month may be refunded to MSF and I am liable to pay the full SCC monthly fee.

iv. I shall provide the SCC with a one-month notice before withdrawing my child/ward from the SCC.

(Signature of Main Applicant's Spouse / _____)

Name: _____

Date of Consent: _____ **(DD/MM/YYYY)**

⁷ i.e. to be engaged under a contract of service and receive a salary

SECTION VIII: TERMS OF CONSENT

DEFINITIONS

1 I understand and agree that the following phrases in this Application Form have the following definitions:

- a) **"Personal Information"** includes my:
- i) personal data (e.g. name, NRIC No, address, age, gender, family/household structure);
 - ii) financial data (e.g. income, insurance coverage);
 - iii) consumption data (e.g. housing, healthcare bills, scheme subscriptions);
 - iv) social assistance data (e.g. social assistance history, assessments for eligibility and suitability for social services and public assistance schemes, social worker case reports);
 - v) medical information; and
 - vi) other information (e.g. savings, payment for utilities) provided by me for the evaluation and administration of social services and public assistance schemes.

It includes the following information collected and kept by the Inland Revenue Authority of Singapore (IRAS) and Central Provident Fund (CPF) Board:

- i) my income information;
- ii) information relating to and derived from my CPF Account(s) and CPF contributions (e.g. CPF Account(s) balance, CPF withdrawal details); and
- iii) information relating to my participation in schemes administered by CPF Board (e.g. medical information, insurance coverage).

The above information kept by IRAS and CPF Board will only be used to determine if I and my Child are eligible for the Subsidies, and to provide me and my Child with the Subsidies.

Information collected from surveys conducted by IRAS and CPF Board is excluded.

Personal Information may relate to past, present or future matters.

- b) **"Family"** refers to anyone related to me by blood, marriage (including step-children and in-laws) or legal adoption, whether or not they live together with me.
- c) **"Participating Agencies"** refer to statutory boards and organisations which are involved in the provision of the Student Care Fee Assistance scheme ("the SCFA") and have been approved by the Government to collect, share or use Personal Information under a valid consent form. New Participating Agencies may be included from time to time.

2. This consent shall be governed by and construed in accordance with the laws of the Republic of Singapore.

CHECKLIST OF REQUIRED DOCUMENTS FOR NEW APPLICATION / RENEWAL OF STUDENT CARE FEE ASSISTANCE (SCFA)

Please tick in the [] after you have attached the relevant documents to the application

Section A: Particulars of Family Members

- [] Parent/s' NRIC/s / Guardian's NRIC
- [] Great/Grandparents' NRIC/s (Only applicable if great/grandparent/s Singapore Citizens and are staying in the same household as reflected on the NRIC)
- [] Child/ren's Birth Certificate/s (including child's siblings in the same household). If child/ren is a Singapore Permanent Resident, please submit Entry / Re-entry Permit.

Section B: Employment Status

Income Documents must reflect Gross Monthly Salary and be within 3 months from the date of application unless specified otherwise.

Gross monthly salary includes regular overtime pay, allowances, commissions, incentives

Employment Status	Supporting Income Documents (Please provide one of the following for both parents where applicable)
[<input type="checkbox"/>] Under company employment	<ul style="list-style-type: none"> ▪ Latest 3 months of pay slips from date of application or ▪ CPF Contribution History Statement up to latest 3 months or ▪ Annex 5: Certification of Employment and Income by Employer that's dated within 3 months from date of child's application.
[<input type="checkbox"/>] Sole Proprietor/ Self-employed/ Freelance employment/ Odd-Job worker	<ul style="list-style-type: none"> ▪ Latest IRAS Tax Statement or ▪ Annex 6: Template for Statutory Declaration on Gross Monthly Income, Employment Details and Working Hours. <p>* The validity of the Statutory Declaration for employment income is one year from the date you</p>

	<i>have performed the Statutory Declaration.</i>
<input type="checkbox"/> Property / Insurance Agent	<ul style="list-style-type: none"> ▪ Monthly commission earnings statements for the 12 months preceding the date of application <i>(Monthly gross income is based on the average earnings per month over 12 months).</i>
<input type="checkbox"/> Undergoing training	<ul style="list-style-type: none"> ▪ A document which verifies that parent is attending, or has been accepted to attend, a training or educational programme. The document should also state the duration of the training or educational programme.
<input type="checkbox"/> Looking for a job	<ul style="list-style-type: none"> ▪ Annex 4: Proof of Job Search by Non-Working Parent
<input type="checkbox"/> Retrenched	<ul style="list-style-type: none"> ▪ Retrenchment letter and Annex 4: Proof of Job Search
<input type="checkbox"/> Incarcerated/In prison	<ul style="list-style-type: none"> ▪ Prison Letter (within last 12 months) or ▪ DRC Visitor's Card (within last 6 months)
<input type="checkbox"/> Unfit for work	Latest Medical Certificate stating the duration that parent/s is unfit for work

Section C: Marital Status

Marital Status	Supporting Documents (Please provide one of the following for both parents where applicable)
<input type="checkbox"/> Single	<ul style="list-style-type: none"> ▪ Screenshot of Registry of Marriage (ROM) search record or ▪ Annex 7: Template for Statutory Declaration on Marital Status
<input type="checkbox"/> Married	<p>(Only applicable for re-marriage)</p> <ul style="list-style-type: none"> ▪ Marriage Certificate for latest marriage <u>and</u> ▪ Divorce and Custody Papers with the clause stating who has “care and control” of the child from the previous marriage
<input type="checkbox"/> Divorced	<ul style="list-style-type: none"> ▪ Certificate of Divorce and Custody Papers with the clause stating who has “care and control” of the child or ▪ Letter from lawyer firm if in the process of divorce
<input type="checkbox"/> Widowed	<ul style="list-style-type: none"> ▪ Certification of Death of spouse
<input type="checkbox"/> Separated	<ul style="list-style-type: none"> ▪ Annex 7: Template for Statutory Declaration on Marital Status or ▪ Police Report

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Section D: Relationship to Child

Relationship to Child	Supporting Documents (Please provide one of the following for both parents where applicable)
<input type="checkbox"/> Biological Father/Biological Mother	<ul style="list-style-type: none"> ▪ NRIC ▪ Relevant income documents in Section B
<input type="checkbox"/> Adopted Father/Adopted Mother	<ul style="list-style-type: none"> ▪ NRIC ▪ Adoption paper/proof that he/she's taking care of the child ▪ Relevant income documents in Section B
<input type="checkbox"/> Legal Guardian	<ul style="list-style-type: none"> ▪ NRIC ▪ Guardianship paper ▪ Relevant income documents in Section B
<input type="checkbox"/> Non-legal Guardian	<ul style="list-style-type: none"> ▪ NRIC ▪ Documents explaining the need to be the non-legal guardian of child (e.g. parent(s)' death certificate, police report, prison letter, statutory declaration, or proof that non-legal guardian is also applicant of approved MOE-FAS application for child.
<input type="checkbox"/> Foster Parents	<ul style="list-style-type: none"> ▪ NRIC ▪ Letter of identity for Foster Parent

Section E: Others

- Police Report
- Latest Prison Letter/DRC Visitor's Card
- Statutory Declaration
- Deed Poll
- Any other supporting documents: _____

Section F: Applicant's Acknowledgement

I have gone through the checklist and attached the necessary supporting documents.

I understand that my application will be delayed or rejected if it is incomplete.

Name of Applicant

Signature of Applicant

Date