



MINISTRY OF EDUCATION

APPLICATION FORM FOR INTERBANK GIRO

(FOR PAYMENT AND REFUND OF FEES, ENRICHMENT PROGRAMMES AND CHARGES)

PART 1: FOR COMPLETION BY APPLICANT

Please complete Part 1. Write within the shaded area. You may need your bank account information to complete this form.

Date	Name of School
To: Name of Bank (please tick one)	Name of Student
<input type="checkbox"/> POSB Bank <input type="checkbox"/> DBS Bank	
<input type="checkbox"/> Other Bank (to specify):	Student UIN/ FIN Number

- (a) I/ We hereby instruct you to process the Ministry of Education's (MOE's) instruction to debit and credit my/ our account.
- (b) You are entitled to reject MOE's debit instruction if my/ our account does not have sufficient funds and charge me/us a fee for this. You may also at your discretion allow the debit even if this results in an overdraft on the account and impose charges accordingly.
- (c) This authorisation will remain in force until terminated by your written notice sent to my/our address last known to you or upon receipt of my/our written revocation through MOE.
- (d) I/ We hereby authorise you to terminate this authorisation without any written notice to me/ us once you are informed by MOE that the above named student is no longer studying in a school under its billing administration.

Name(s) of Account Holder	Bank Account No.
For Singapore Citizen - NRIC No.	For PR/ Foreigner - Passport No.
Address	Signature(s)/ Thumbprint(s) / Company's Stamp
	* For thumbprints, please go to the branch for verification
Contact No.	(As in Bank's records)

PART 1A: OPTION TO PAY ENRICHMENT PROGRAMMES AND OTHER SCHOOL CHARGES BILLED BY SCHOOLS THROUGH THE SAME BANK ACCOUNT. Please select as appropriate.

- Yes.** I/We hereby authorise MOE to deduct the enrichment programmes and other school charges incurred by the above-named student and billed by his/her school from the same Bank Account.
- No.** I/We do not wish to pay the enrichment programmes and other school charges incurred by the above-named student and billed by his/her school from the same Bank Account.

PART 2: FOR COMPLETION BY MOE/ SCHOOL

Bank		Branch		MOE Bank Account Number											Level/Class					
7	1	7	1	0	0	8	0	0	8	0	1	2	4	3	6	1				
Bank		Branch		Account Number To Be Debited											Reference Number					

PART 3: FOR COMPLETION BY BANK

To: MINISTRY OF EDUCATION

This application is rejected (please tick) for the following reason(s):

<input type="checkbox"/> Signature/ Thumbprint# differs from Bank's records	<input type="checkbox"/> Wrong account number
<input type="checkbox"/> Signature/ Thumbprint# incomplete/ unclear#	<input type="checkbox"/> Amendments not countersigned by applicant
<input type="checkbox"/> Account operated by signature/ thumbprint#	<input type="checkbox"/> Others: _____

Please delete where applicable.

_____ Name of Approving Officer	_____ Authorised Signature	_____ Date
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