

Application Form for BOARDING ADVISORS

Please return the completed form to:						(click to insert photo)			
Boarding Office	•								
NUS High School boarding@highse	of Math & Science								
PERSONAL D	DETAILS								
Title and Full Nam	e as in Passport / Ide								
Salutation :									
Surname :									
Given Name :									
NRIC/FIN :			Nationality :		S'pore PR :				
Home Tel :			Office Tel :		Mobile No :				
Home Address :									
Email Address	:				Date of Birth :				
Gender :			Race :		Religion :				
Hobbies and Interests :									
Emergency Contact									
Name :			Relationship:		Contact No :				
EMPLOYMENT HISTORY(Including current employment)									
From	То	Name of Org	ganisation		Country	Position Held			
PAST BOARD	DING SCHOOL	EXPERIEN	CE (List any Hostels or I	3oarding Schools that yo	ou have attend	ded or worked in)			
PAST BOARD	DING SCHOOL	EXPERIEN Institutions A		Boarding Schools that yo	ou have attend	ded or worked in) Nature of involvement			
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	T			Boarding Schools that yo					
From	T			Boarding Schools that yo					
From LANGUAGE F	То	Institutions A		Spoken Only	Country				
From LANGUAGE F	To	Institutions A	Attended		Country	Nature of involvement Proficiency			
From LANGUAGE F	To	Institutions A	Attended		Country	Nature of involvement Proficiency			

FAMILY M	EMBERS (or OTHERS) WHO WILL BE S	TAYING AT T	HE NUS HIGH BOARDING	SCHOOL	WITH YOU					
Relationship	Full Name	Date of Birth	Status in Singapore		Occupation					
PLEASE ANSWER THE FOLLOWING QUESTIONS. (If the answer is "YES", please provide details on a separate sheet of paper.)										
1. Have y	ou ever been convicted in a court of law of any country	ſ?		☐ Yes	□ No					
			4.0		П.,					
	ou ever been dismissed, discharged or suspended from	☐ Yes	□ No							
	ou ever had, or are you suffering from any			_	_					
-	physical impairment?			☐ Yes	□ No					
-	disease?			☐ Yes	□ No					
-	mental illness?			☐ Yes	□ No					
-	medical condition?			☐ Yes	□ No					
4. Have y	ou ever had any surgical operation previously?			☐ Yes	□ No					
REASON(S) FOR APPLICATION (use a separate sheet if necessary)										
ANY OTHER INFORMATION (use a separate sheet if necessary)										
Any other relevant information you would like to give in support of your application e.g. services that you can contribute, pastoral/counselling experience, knowledge of software packages etc.										
DECLARATION										
I declare that the particulars in this application are true to the best of my knowledge and belief, and I have not wilfully suppressed any material facts. Any misrepresentation or omission of information will be grounds for withdrawal of an appointment offer or for dismissal.										
					_					
	Signature of Applicant		Date							

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