

PAYA LEBAR METHODIST GIRLS' SCHOOL (SECONDARY)

296 LORONG AH SOO SINGAPORE 536742 TEL: 6281 6606 FAX: 63820558 EMAIL: plmgss.moe.edu.sg

Name of Award: Mrs Lee Siew Choo Education Award

For sponsorship of post-secondary education needs of PL-Lites

Background:

Mrs Lee Siew Choo was the Principal of Paya Lebar Methodist Girls' School (Secondary) from 1998 – 2009. Under her leadership, PLMGS (Sec) became an Autonomous School in 2001. As an autonomous school, PLMGS (Sec) offers a wider range of programmes that enhance each student's learning experience and develop her talents. During the 12 years of her Principalship, she was committed to promoting excellence in education in PL(Sec). In 2002, the school was conferred the Singapore Quality Class certification for the stellar processes that were in place, and in 2007, the school was conferred the School Distinction Award by the Ministry of Education of Singapore, testifying to the quality of education provided in PLMGSS . In 2005-2007, Mrs Lee oversaw and led the school through the upgrading of our Lor Ah Soo campus. This saw the fund-raising for the building of the beautiful Agape Concert hall. PLMGS (Sec) moved to Serangoon Ave 1 as the school buildings were renovated. In 2007, the school moved back to the current Lorong Ah Soo campus.

Objectives of the Award

The award's aim is to provide continuing support for financially needy old girls from Paya Lebar Methodist Girls' School (Secondary) and encourage them to thrive and succeed in the next lap of their educational journey in their lives.

The objectives are:

- to promote commitment to the H.E.A.R.T values that education in Paya Lebar Methodist Girls' School has been synonymous with;
- to help students overcome financially needy family situations; and
- to encourage PL-Lites to pursue Post-Secondary Education to the highest level possible.

Details of the Award

Eligible Cohort: Girls who have graduated from Paya Lebar Methodist Girls' School (Secondary)

Year of first award: 2022

Award amount: \$2000 per awardee **Application Period:** 01 Jan – 31 July 2025

Award Criteria:

- i. An old girl from Paya Lebar Methodist Girls' School (Secondary)
- ii. Admitted to a local Post-secondary institute (i.e. JC, Polytechnic, or ITE)
- iii. Good Conduct and Character (Endorsed by Form-teachers and P, PL Secondary)
- iv. One-time award for each awardee
- v. Financially needy situation (To include per capita Income and declaration of receipt of other bursary/financial aid)

MRS LEE SIEW CHOO EDUCATION AWARD

For Sponsorship of Post-Secondary Education Needs of PL-Lites

APPLICATION FORM

Section I: Particulars of Old Girl of Paya Lebar Methodist Girls' School (Secondary)

Name of applicant:		
NRIC number:		
Year of Graduation:		
Class in year of Graduation:		
Names of Form Teachers:		
Home Address:		
Email Address:		
Contact Number:		
Name of current Post-		
secondary Education		
Institute (PSEI) enrolled in:		
Name of Course enrolled in		
current PSEI:		
	<u> </u>	

Section II: Information on Other Household Members

Please include details of parents and all unmarried siblings and/or grandparents staying with the applicant at the same address listed in Section I. For instances where the applicant is living with a legal guardian, the household members will comprise that of the legal guardian's family taking care of the applicant living in the same address listed in Section I.

No.	Name	Relationship	Age	Occupation	Gross Monthly Income from current employment / other sources of income
1					
2					
3					
4					
5					
6					
7					
8					
		Т	otal Gross	Household Income	

Section III: Personal Statement

Please explain why you are apply	g for this award and how you intend to use the \$2000 award if it is awarded to	you.
Section IV: Declaration of receip	of other bursary/ financial aid	
Are you receiving any other hurs	y / financial aid? Yes / No (please circle)	
	ary / financial aid and amount:	
	given by me in this form or any part thereof may be shared with personnel inv	
rest of my household, for this to	ee Siew Choo Education Award. I consent, and I have obtained the consent from	m the
rest of my nousehold, for this to	s given to relyida (sec).	
Name:	NRIC No:	
Signature:	Date:	

DOCUMENTS TO SUBMIT

- Photocopy of NRIC or Birth Certificate or Passport of all family members in the household.
- Documentary evidence of the gross income of **every member of the household** (excluding full-time students), per the following:

For household members who are Singaporeans or PR:

For household members who are employed, regardless of age:

- Latest payslip/ letter from employer certifying gross monthly income; and
- CPF Transaction Statement or Contribution History for the past 6 months; and
- Latest IRAS Income Tax Notice of Assessment

For household members who are unemployed or retired, aged 62 years and below

- CPF Transaction Statement for the past 6 months.

For household members who are self-employed:

- Latest IRAS Income Tax Notice of Assessment; and
- CPF Transaction Statement or Contribution History for the past 6 months; and
- Income Declaration Form Annex A Part A (for self-employed persons who are not required to pay tax)

For household members who are non-Singaporean:

- Income Declaration Form Annex A Part B; and
- Latest payslip, if employed.

Any other documents as and when required by the school for the purpose of verifying income.

Part A: DECLARATION OF SELF-EMPLOYMENT

Household members must complete this section if they are either:

Category (a) - Self-employed and not required to pay tax; or

Category (b) - The latest tax assessment does not reflect current income status.

I/We* declare that I am/we are* currently self-employed and my/our* current self-employment income are* as follows:

Name & NRIC No.	Category*	Type of Self- employment	Current Monthly Self-employment Income	Signature of Household Member and Date
	(a) /(b)			
	(a) /(b)			

Part B: FOR HOUSEHOLD MEMBERS WHO ARE NON-SINGAPOREAN

l,	(Name), FIN:		
parent/grandparent/sibling* of		(beneficiary's name) hereby	
declare that:			
1) I am currently: () employed (please attach pay If payslip is not available, please explain			
() unemployed (please specify:	*retrenched/ retired/others _)
() self-employed 2) My gross monthly income is \$	/month.		
Remarks: I acknowledge that the information I h	nave provided is accurate.		
Declared by:			
Full Name and Signature	 Date	Contact No	