Form TF

Tel. No.: 02-422246/47 Fax No.: 02-422585



APPLICATION OF TRANSFER OF SCHOOL Section A (Applicant)

DEPARTMENT OF SCHOOLS **MINISTRY OF EDUCATION BB3510** BRUNEI DARUSSALAM

Previous Reference :	Present College/School:		
Applicant's Name :		Sex : Male/Female	
Passport Number :	Expiry Date of Dependant Pass :		
Sponsor's Name:			
Passport Number: Expiry Date of Employment Pass:			
Applicant's/Sponsor's Signature :			
Section B (Confirmation by the Previous College/School)			
	School:		
I certify that the above stud	lent has been registered in this College/School in the year 19	and * has been transferred/shall be	
transferred to		in the	
year 19 and comp	pleted Form/Primary 19		
Signature		College/School Chop	
	ister:		
Date	:		
Telephone No.	3		
Section C (Confirmation by Present College/School) Name of Present College/School: JERUDONG INTERNATIONAL SCHOOL			
I certify that the above student *has been transferred/shall be transferred to this College/School from			
in the year and is now studying in Form/Primary 20			
Signature	· POPS	College/School Chop	
Name of Principal/Headma	ster NICHOLAS SHEEHAN		
Date	£		
Telephone No.	241 1000	DAI	
Section D (UPB Office)			
For Official Use Only			
I hereby certify that the above particulars are complete.			
		Payment :	
Director of Schools,		Present	
Department of So Ministry of Educ	Reference:		
Brunei Darussal	am.		

Reminder:

A fee of \$10.00 per year is charged if date of transfer exceeds 3 months. \ast Delete if not applicable.

Date :