

Form TF



جباتن سکوله
کمنتريڻ فنڊيڊيقتن
نڬارا بروني دارالسلام

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

DEPARTMENT OF SCHOOLS
MINISTRY OF EDUCATION BB3510
BRUNEI DARUSSALAM

APPLICATION OF TRANSFER OF SCHOOL
Section A (Applicant)

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 : Date :
Please enclose the latest Confirmation Letter.

Section B (Confirmation by the Previous College/School)

Name of Previous College/School :
I certify that the above student has been registered in this College/School in the year 19 and * has been transferred/shall be transferred to in the year 19 and completed Form/Primary 19

Signature :
Name of Principal/Headmaster :
Date :
Telephone No. :

College/School Chop

Section C (Confirmation by Present College/School)

Name of Present College/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 :
Name of Principal/Headmaster :
Date :
Telephone No. :

College/School Chop

Section D (UPB Office)

For Official Use Only

I hereby certify that the above particulars are complete.

.....
*Director of Schools,
Department of Schools,
Ministry of Education,
Brunei Darussalam.*

Payment :
Receipt No. :
Present
Reference :

Date :

Reminder :

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