National and International Conference and Competition Initiative for Primary Schools ("NICCIPS")

A. School Details

Name: 
School ID: 
Address: 

Telephone: Fax: 
Email: 

B. Head Master Details

Name: 

Telephone: Fax: 
Email: 

C. Conference /Competition Details

Name: 
Date: 
Venue: 
Website: 

D. Participant Details

Name: Telephone: 
NRIC: Passport Number: 
Role: Email: 

Name: Telephone: 
NRIC: Passport Number: 
Role: Email: 

Name: Telephone: 
NRIC: Passport Number: 
Role: Email: 

Name: Telephone: 
NRIC: Passport Number: 
Role: Email:
F. Acknowledgement

I, ____________________________________ Headmaster of __________________________________________
acknowledge that all details provided above are true and any information found.
I confirm that I have read and agree to the terms and condition stipulated for NICCIPS initiative.

_____________________________  _______________________________
Name:                                                                       Date:

IC No:

G. For Secretariat use

Date Application Received:

Remark:

Approved / Not Approved: