



COMMONWEALTH SECONDARY SCHOOL
Nurturing Champions of Today and Leaders of Tomorrow

9 July 2018

Ref: CWSS/2018/02-admin/s4E/NA

Dear Parents/ Guardians of Sec 4

PAYMENT FOR LEARNING RESOURCES AND ENRICHMENT PROGRAMMES

1. As part of the school's effort and commitment to provide an enriching and holistic learning experience for our students, a series of learning resources and enrichment programmes have been planned. While much of the cost of employing additional educational and administrative resources has been heavily subsidised by the school, a co-payment is necessary for some of these programmes/ items.

2. The school conducts 2 collection cycles (in February and August) for these non-MOE standard fees. For Semester 2, we will be collecting the payments for:

No	Item	Description	Amount	Mode of Payment
i.	History Elective 10-year series	To prepare students for the national exams at the end of the year by familiarising them to the format and difficulty of past year papers.	\$4.00	Cash/ Cheque
ii	Social Studies Elective 10-year series		\$4.00	Cash/ Cheque
Total			\$8.00	

3. For payment, we would be issuing payment advice to your child via his/ her class teachers. Please advise your child to hand the cash/ cheque[^] to the **General Office** within 10 working days from the date of the payment advice.

4. Students who are under the MOE/ SAC Financial Assistance Scheme do not need to pay.

5. If you do not consent your child to attend the above programme(s)/ purchase the above item(s), please return the enclosed Consent Form to the General Office within 5 working days from the date of this letter.

6. For further queries on the payment, please contact our Administration Manager, Ms Jasmine Neo at **6560-6866**.

[^] Cheque should be payable to 'Commonwealth Secondary School'.

Thank you

Yours sincerely,

A handwritten signature in black ink, consisting of several loops and a long horizontal stroke at the end, representing the name Mr Ng Boon Kiat.

Mr Ng Boon Kiat
Principal

CONSENT FORM

I, parent/ guardian* of _____(Name of student)
from _____(Class of student), do not consent my child/ ward* to attend the
programme(s)/ purchase the item(s):

- i. History Elective 10-year series
- ii. Social Studies Elective 10-year series

State reason: _____

Signature of Parent/ Guardian

Date

Contact Number

