

How to fill in “Adhoc Application for use of Post Secondary Education Account” form?

1. Please click 1 of the following links depending on your type of course:

- For students attending **Diploma in Maritime & Offshore Management** course offered by MPA, click [here](#) for the form.
- For students attending **Part-time Diploma / Advanced Diploma / Specialist Diploma / Diploma Conversion course**, click [here](#) for the form.
- For others, click [here](#) for the form.

2. Please fill in Part 1 of the form as follows:

Part 1 (Compulsory) To be completed by student – please write clearly

1. Fill in your name as in your NRIC

2. Fill in your contact no.

3. Fill in your NRIC no. e.g. S 1234567 A

Name as in NRIC/BC: [Grid]

Contact No: [Text]

Institution Name: SINGAPORE POLYTECHNIC

Course/Fee Description: [Text]

NRIC/BC No.: [Grid]

Usage Category: (refer to next page) [Grid]

Course/Fee Amount: S\$ [Text]

Please do **NOT** fill in these field. We will fill in for you. If the category is already pre-filled for your type of course, please leave it as it is.

4. Fill in the course fee amount as stated in your Payment Email

3. Please sign at Part 3 of the form:

Part 3 (Compulsory) To be completed by Parent / Legal Guardian or by Student Aged 21 and above

The below MUST be signed by Parent/ Legal Guardian if above student or sibling/s whose PSEA used (in Part 2) is/are below the age of 21 years

Under Section 16(D) of the Education Endowment and Savings Schemes Act, I hereby authorise the PSE Scheme Administrator to make deductions from my / my child's (children's) PSEA to pay fees or charges incurred by myself / my child at any approved institution.

I declare that, to the best of my knowledge, all the information in this form is true and accurate. In connection with this application, I undertake to furnish to the PSE Scheme Administrator any documents which the PSE Scheme Administrator may require for verification purposes, and also authorise the PSE Scheme Administrator to obtain from the relevant authorities / persons any information or documents which may be required for such purposes.

Name of Parent / Legal Guardian: _____

NRIC of Parent / Legal Guardian: _____

*2. Signature of Parent / Legal Guardian (if student/sibling(s) is/are below 21 years old) _____

*1. Signature of Student (aged 21 and above) _____

Date: _____

Fill in Parent's Name and NRIC if Parent is required to sign

*1. You sign here only if you are aged 21 and above.

*2. If you are below aged 21, your parent needs to sign here. You do not need to sign.

3. Fill in today's date

4. If you are using your own PSEA only, you can skip part 2 of the form. However, if you are going to use your siblings' PSEA to pay for the course fees, please fill in part 2 as follows:

Part 2 (Optional)		Please leave this section blank if student is using his/her own PSEA only. To use the PSEA of siblings(s), please complete below. Sibling refers to natural / adopted / step-sibling.															
Deduction Priority		First				Next				Last							
Name Of Sibling		<input type="text"/>				<input type="text"/>				<input type="text"/>							
NRIC / BC No of Sibling		<input type="text"/>	-	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		
Maximum Amount To Use (% of Fees) (Place a ✓ at the appropriate box)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

1. Fill in your sibling name as in his/her NRIC.

2. Fill in your sibling NRIC no. e.g. S 1234567 A

3. Place a ✓ at the appropriate box

and your sibling(s) needs/need to sign at part 2 of the form if they are above 21, if not, your parents need to sign part 3 of the form :

Part 2 (Optional)		Please leave this section blank if student is using his/her own PSEA only. To use the PSEA of siblings(s), please complete below. Sibling refers to natural / adopted / step-sibling.															
Deduction Priority		First				Next				Last							
Name Of Sibling		<input type="text"/>				<input type="text"/>				<input type="text"/>							
NRIC / BC No of Sibling		<input type="text"/>	-	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		
Maximum Amount To Use (% of Fees) (Place a ✓ at the appropriate box)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
For Siblings Aged 21 and Above		Under Section 16(D) of the Education Endowment and Savings Schemes Act, I/we hereby authorise the PSE Scheme Administrator to make deductions from my / our PSEA to pay fees or charges incurred by my / our sibling named in Part 1 at any approved institution.															
		_____ Signature				_____ Signature				_____ Signature							

Note: If there are errors or omissions in the information on sibling(s), only the student's PSEA will be used for the deduction of fees.

Part 3 (Compulsory)		To be completed by Parent / Legal Guardian or by Student Aged 21 and above The below MUST be signed by Parent/ Legal Guardian if above student or sibling/s whose PSEA used in Part 2) is/are below the age of 21 years																			
Under my / our name		I hereby authorise the PSE Scheme Administrator to make deductions from my / our PSEA to pay fees or charges incurred by myself / my child at any approved institution.																			
I declare that the information provided in this form is true and accurate. In connection with this application, I undertake to furnish the relevant authorities / persons any information or documents which may be required for such purposes.																					
		_____ Name of Parent / Legal Guardian				_____ NRIC of Parent / Legal Guardian				_____ Signature of Parent / Legal Guardian (If student below 21)				_____ Signature of Student (If aged 21 and above)				_____ Date			

Fill in Parent's Name and NRIC if Parent is required to sign

1. Your sibling sign here if above 21.

If Sibling is below aged 21, your parent needs to sign here.

5. Please submit the **original** completed form to PACE Academy, Singapore Polytechnic by post or hand in person at PACE Academy office (Mon-Fri: 8:30am to 7:00pm):

Singapore Polytechnic
PACE Academy
500 Dover Road
Blk T1A, Level 1
Singapore 139651