DBS   POSB

POSB CHILD DEVELOPMENT ACCOUNT (CDA)
FORM FOR INTERBANK GIRO

PART 1: FOR APPLICANT'S COMPLETION (fill in the spaces indicated with a ✓)

Date:

✓ _____

To: Name of Bank:

DBS Bank Ltd

Branch:

✓ _____

Name of Child (as in CDA):

✓ _____

Child's Birth Certificate Number:

✓ _____

Child Development Account (CDA) Number:

✓ _____

Name of Approved Institution (AI):

✓ _NEWTON KINDERGARTEN_____

Trustee's Name:

✓ _____

Trustee's Home/Office/Mobile Number(s):

✓ _____

Trustee's Signature/Date :

✓ _____
(as in bank's records)
For thumbprint, please verify with DBS/POSB branch before submitting to AI.

(a) I hereby instruct you to process the Approved Institution's instructions to debit my Child Development Account (CDA).
(b) You are entitled to reject the Approved Institution's instruction if my CDA does not have sufficient funds and charge me a fee for this.
(c) This authorisation will remain in force until terminated by your written notice sent to my address last known to you or upon receipt of my written revocation through the Approved Institution.

PART 2: FOR APPROVED INSTITUTION'S COMPLETION

Bank			Branch			Approved Institution's Account Number												
7	3	3	9	5	9	1	4	5	5	9	0	2	0	0	1			

Approved Institution's Reference Number												

Bank			Branch			CDA Account Number To Be Debited											

PART 3: FOR BANK'S COMPLETION

To: Approved Institution

This Application is hereby REJECTED (please tick) for the following reason(s):

☐ Signature/Thumbprint[#] differs from Bank's records

☐ Signature/Thumbprint[#] incomplete/unclear[#]

☐ Account operated by signature/thumbprint[#]

☐ Wrong account number

☐ Amendments not countersigned by customer/BO

☐ Other reason(s): _____

Name of Approving Officer	Authorised Signature	Date

* For thumbprints, please go to the branch with your identification.
[#] Please delete where inapplicable

SPARK
Singapore Preschool Accreditation Framework

纽顿幼稚园
Newton Kindergarten

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CHILD DEVELOPMENT ACCOUNT AUTHORIZATION FORM (CDA)
AUTHORIZATION FOR USING CDA FUNDS TO PAY SCHOOL FEES

1. Student's Particulars

Name of Child   : _____   Class / Level : _____

Birth Certificate No   : _____   Birth Order: 1 / 2 / 3 / 4

Citizenship   : Singaporean / Permanent Resident   Sex : M / F

2. Trustee's Particulars

Name of Parent   : _____   Contact No: _____

NRIC No   : _____   Citizenship: Singaporean / Permanent Resident

3. CDA Details

CDA belongs to the Student / Sibling

CDA No   : _____   Bank: _____

4. Use of Sibling's Account

Sibling's Name   : _____   Class / Level : _____

Birth Certificate No   : _____   Birth Order: 1 / 2 / 3 / 4

Citizenship   : Singaporean / Permanent Resident   Sex : M / F
(Please attach a copy of child's birth certificate if child is not a registered student in the kindergarten)

5. Authorization

I, (Name of Trustee) _____ of (NRIC No) _____

hereby authorize Newton Kindergarten to make deduction from my child's CDA in settlement of (Name of Student)

_____ fees.

I am fully aware that the deduction of CDA will take effect upon approval by the bank and I am also aware that

should my child's CDA have insufficient funds, I will need to pay the full amount in cash / cheque.

_____   _____   _____

Name of Trustee   Signature of Trustee   Date