

DECLARATION FORM

This form is for the purpose of child care subsidy / KiFAS application and is to be submitted with:

- Form 1 / KF1 – Child Care Enrolment and Subsidy / KiFAS Application
(for Singapore Citizen children during enrolment); or
- Form 2 / KF2 – Subsidy / KiFAS Update and Special Approval Application
(for existing enrolled Singapore Citizen children)

I, _____, NRIC/ FIN/ Passport No.: _____

Address: _____

do solemnly and sincerely declare that:

Section I: Self-employed Person without IRAS Notice of Assessment (NOA) i.e. annual income of less than \$22,000

(1) I am working as a (pls select accordingly)

Hawker / Food Caterer:

Stall / Company Name: _____

NEA license / Business registration No.: _____, Effective Date: _____
(dd/mm/yyyy)

Note: Please provide a copy of the stall owner's NEA licence for verification.

Private Tutor / Babysitter

In the past year, I am rendering / have rendered my services to the following persons:

S/N	Name of child's parent	Child parent's NRIC No.	Mobile Number	Child's Name	Child's BC No.	Commencement Date of Service (dd/mm/yyyy)

Freelancer / Homebased Business e.g. Online business owner / Commodity Broker

In the past year, I am rendering / have rendered my services to the following persons:

S/N	Name of Client	Mobile Number	Commencement Date of Service (dd/mm/yyyy)

Business Owner or Partner:

Company Name: _____.

Business registration No.: _____, Effective Date: _____.
(dd/mm/yyyy)

Others:

Occupation: _____ at _____.
(nature of job) (company name)

Effective Date: _____.
(dd/mm/yyyy)

- (2) I declare that I work at least 56 hours per month (**applicable to main applicant only**).
- (3) My gross monthly income is \$_____.

Section II: Salaried Employee without CPF Contribution e.g. Hawker Assistant

(1) I am working as a _____.
(occupation)

At _____ effective from _____.
(company name) (dd/mm/yyyy)

- (2) I declare that I work at least 56 hours per month (**applicable to main applicant only**).
- (3) My gross monthly income is \$_____.

Note: Please provide a copy of the stall owner's NEA licence for verification.

Section III: Separated from Spouse or Undergoing Divorce

(1) I am not in contact with my spouse since _____
(dd/mm/yyyy)
due to _____
(reason)

(2) My spouse's particulars are as follows:

- Name: _____
- NRIC / Identification no.: _____

(3) I am caring for my child / children whose particulars are as follows:

S/N	Name of Child	Birth Certificate No.

Section IV: Non-Parent Care Giver

(1) I am the primary care-giver for the following child(ren) since _____
(dd/mm/yyyy)

Reason why I am caring for the child(ren) is: _____

(2) The particulars of the child(ren) is/are as follows:

S/N	Name of Child	Birth Certificate No.	Relationship with Child

(3) The above child(ren) is/are residing with me at _____

(address)

Consent and Declaration by Applicant

Terms of Consent and Consent Clauses

1. I understand and agree that these phrases used in the consent form have the following definitions:

1.1. **“Personal Information”** includes my:

- (i) personal data (e.g. name, NRIC No, address, age, gender, family/household structure and family/household composition);
- (ii) financial data (e.g. income, insurance coverage);
- (iii) consumption data (e.g. housing, healthcare bills, scheme subscriptions);
- (iv) social assistance data (e.g. social assistance history, assessments for eligibility and suitability for social services and public assistance schemes, social worker case reports);
- (v) medical information (e.g. medical reports); and
- (vi) other information (e.g. savings, payment for utilities) provided by me for the evaluation and administration of social services and public assistance schemes.

It includes information collected and kept by various Government ministries, departments and statutory boards, including the following information collected and kept by the Inland Revenue Authority of Singapore (IRAS) and Central Provident Fund (CPF) Board:

- (i) my income information;
- (ii) information relating to and derived from my CPF Account(s) and CPF contributions (e.g. CPF Account(s) balance, CPF withdrawal details); and
- (iii) information relating to my participation in schemes administered by CPF Board (e.g. medical information, insurance coverage)

Information collected from surveys conducted by IRAS and CPF Board is excluded.

Personal Information may relate to past, present or future matters.

1.2. **“Family”** refers to anyone related to me by blood, marriage (including step-children and in-laws) or legal adoption, whether or not they live together with me.

1.3. **“Schemes”** refer to all Participating Schemes.

1.4. **“Participating Schemes”** refer to social services and public assistance schemes provided by the Government and/or Participating Agencies, including:

- (i) healthcare, aged care, childcare, education, employment, housing, social assistance and counselling services and schemes;
- (ii) any form of financial assistance such as subsidies, grants, tax reliefs, vouchers or bursaries; and
- (iii) schemes administered by CPF Board.

1.5. **“Participating Agencies”** refers to statutory boards and organisations approved by the Government to provide the Participating Schemes, including any new statutory boards or organisations which may be included from time to time, and their authorised agent(s) if any.

2. This consent shall be governed by and construed in accordance with the laws of the Republic of Singapore.

For the list of Participating Agencies and Schemes, and FAQs, please go to: <https://go.gov.sg/homes-schemes>

3. I/We understand that the Government of Singapore and Participating Agencies require my Personal Information for the following purposes:

- 3.1 To determine and/or reassess if I, the Applicant, and/or any of my Family members, qualify for the Scheme(s) set out in the Scope of Consent, or KidSTART;
- 3.2 To determine and/or reassess if I, the Applicant, and/or any of my Family members, meet all other eligibility criteria for the Scheme(s) set out in the Scope of Consent or for any other assistance scheme which may benefit me, the Applicant and/or our Family Members such as KidSTART;
- 3.3 To provide me, the Applicant, and/or any of my Family members, with the Scheme(s) set out in the Scope of Consent; and/or
- 3.4 To refer me, the Applicant, and/or any of my Family members, for any other assistance which may benefit me, the Applicant and/or any of my Family members such as KidSTART.

4. I/We hereby consent and agree that the Government and Participating Agencies may collect, share and use my/our Personal Information, to the extent permitted by law, for any of the purposes in paragraph 3. To avoid doubt, my/our Personal Information may also be shared with any agency that provides any scheme or assistance that may benefit me, the Applicant and/or any of my Family members such as with KidSTART Limited.

5. I/We understand that the Government and Participating Agencies may, without further reference to me, the Applicant, and/or any of my Family members, collect, share and use my/our Personal Information to determine if I and/or any of my Family members qualify for any or all of the Schemes set out in the Scope of Consent, and where I and/or my Family member so qualify, to provide such Schemes to me and/or my Family member.

6. I/We understand that my/our Personal Information and the Personal Information of my/our Family members included in this application, collected for any purpose stated in paragraphs 3-4 may also be used by the Government and/or Participating Agencies for analysis and evaluation to improve and/or make changes to the Schemes, and/or to create new social services or public assistance schemes.
7. I/We understand that if there are any discrepancies in the Personal Information collected, such discrepancies may be reflected to the relevant Government ministry(ies), department(s) or agency(ies), so that they may take the necessary steps to rectify any inaccurate records relating to me/us.
8. I/We further consent for the Ministry of Social and Family Development (“MSF”) and the Early Childhood Development Agency (“ECDA”) to share my personal information, the Applicant, and the personal information of any of my Family member included in this application with any agency for one or more of the following purpose(s):-
 - 8.1 The provision of any Pre-School Subsidies and Financial Assistance;
 - 8.2 Referral for the provision of other financial assistance or social assistance, such as KidSTART; and/or
 - 8.3 Programme evaluation, outreach, service delivery, analysis and/or research that benefits the community in Singapore.
9. Where applicable, I/we consent and allow the early childhood development centre (the “ECDC”) indicated in this application to apply for any of the Pre-school Subsidies and/or Programmes on my/our behalf.
10. My/Our consent shall remain valid until I/we withdraw in writing. I/we accept that it could take up to 10 working days from the date receipt by the Government before any withdrawal of consent takes effect.
11. In the event that the consent obtained pursuant to my/our submission of this form is subsequently found to be false, defective or otherwise invalidated through no fault of the Government or Participating Agencies, I/we agree that the Government or Participating Agencies, as the case may be, shall not be liable for any collection, use, sharing or disclosure of my Personal Information that was necessary for any of the purposes in paragraphs 3, 5,6 before such falsity, defect and/or invalidation of consent was known to the Government or Participating Agencies.
12. I/We understand that my/our personal information may be used or retained by the Participating Agencies for compliance with requirement(s) in any statute, subsidiary legislation, Code of Practice and/or for audit purposes even if my/our consent has expired or has been withdrawn in paragraph 6.
13. I/We understand that if I/we had opted to provide my/our signatures via electronic methods, the said electronic signatures would be legally valid and binding.
14. If I submit this form by email, I confirm that I am aware of the risks of transmitting my Personal Information to the Government and/or Participating Agencies via email. I agree that I will not hold the Government and/or Participating Agencies responsible or liable for any loss of my Personal Information arising from any unauthorised access of my email or my email account.
15. I/We have read and understood this consent form fully, including the attached Terms of Consent and agree to its content. I/We understand that the onus is on me/us to ensure that all information provided is true and accurate. I/We hereby declare that the information provided in this application by me/us is accurate, and I/we furnish it knowing that I/we may be liable to prosecution if I/we have wilfully stated any information which I/we know to be false or misleading or do not believe to be true.
16. In the event of any false or inaccurate information being submitted to the Government, my/our application may be rejected or any prior approval may be withdrawn. In addition, I/we may be required to repay, in full or part, the subsidy and/or financial assistance provided to me/us by the Government.
17. I/We fully understand that the ECDA and MSF will assess our application according to their criteria and have the discretion to determine the amount of subsidy and/or assistance to be granted to me/us. I/ we are aware that if there are any payments made in mistake or error, I/we may be required to return any such payment to the Government.

Name and NRIC/FIN/Passport No.

Signature of Declarant

DD / MM / YYYY
Date

Declaration by Licensee / authorised personnel of Early Childhood Development Centre

1. I am [the Licensee / authorised by the Licensee of this Centre] to complete this declaration.
2. I am aware that all information submitted is strictly confidential. The Centre is required to maintain the confidentiality of all such information and records in accordance with law, including the Personal Data Protection Act 2012 and the Early Childhood Development Centres Regulations 2018.
3. I have verified¹ the above information to be true, to the best of my knowledge and belief. I understand that I/our Centre may be liable to prosecution for any information furnished which I know to be false or do not believe to be true. I understand that any part of this application improperly completed may lead to the rejection of the application.

_____ Name of Centre / Kindergarten	_____ Centre Code	_____ Contact No.
_____ Name / Designation of Personnel	_____ Signature	DD / MM / YYYY Date

¹ Please refer to Section 8 of the Code of Practice for the requirements relating to the administration of subsidy.