



# Early Childhood Care and Education Authority

Serial:

Photo

## Application form Registration of Attendant

**Registration period: January 2025 - December 2026**

1. Name of School : \_\_\_\_\_
2. Name of registered Attendant: \_\_\_\_\_
3. Date Attendant joined: \_\_\_\_\_
6. Title (Mr/Mrs/Mrs) : \_\_\_\_\_
7. Address (School) : \_\_\_\_\_
8. Phone number : \_\_\_\_\_
9. Phone number –Home : \_\_\_\_\_
10. Email address : \_\_\_\_\_
11. Date of birth : \_\_\_\_\_ Age \_\_\_\_\_
12. Nationality : \_\_\_\_\_
13. Work permit if (applicable) : \_\_\_\_\_
14. National ID No. : \_\_\_\_\_
15. Address –Home : \_\_\_\_\_  
: \_\_\_\_\_  
: \_\_\_\_\_

**16. Academic qualifications**

Qualification (Certificate of Primary Education)	
Year: .....	Rank: .....
Subject	Grade

**17. Record of service in pre-primary sector**

Name of pre-school Institution	FROM (year)	TO (year)	Position held

**18. Present employment**

Self employed	
Employed by an individual	
Employed by an organization	
Name of employer: (if applicable)	
Monthly salary:	
Contribution to NPS: (where applicable):	

**18. Applicable for Pre-Primary School in the GIA Scheme Only**

Bank Account Number	
Name of Bank	
Branch	

**19. Statement from Manager**

I ..... , Manager of  
..... hereby certify to the correctness of the  
information provided in this application form.

Signature of Manager: .....



Date: .....

**Statement of Attendant**

I ..... certify that the information given on this form is  
true, complete and correct to the best of my knowledge