

## **Fuchun Youth Alumni Application Form**

Name:		
Contact Number: (H)	(Mobile)	-
(Email)		
Year Graduated:		
Current School:		
Student Leader Position in FCP (If a	ny):	
*Please submit the application for	m after receiving your Secondary School	posting.
Parent's/Guardian's Particulars:		
Name of parent/ guardian:		
Relationship with child: Father/ Mo	ther / Guardian (Please circle)	
Contact Number: (H)	(Mobile) (Office	:)
*I agree to my child/ward joining t	he Fuchun Youth Alumni.	
	Parent's/Guardian's Signature	Date