



**JURONGVILLE SECONDARY SCHOOL  
PE/CCA DEPARTMENT  
CCA Transfer Form 2018**

Name:	
Class:	

**Request to transfer out from the current CCA:**

Name of CCA:	
Reason(s):	
Effective Date:	
Endorsed by Teacher IC:	
Signature of Teacher IC:	

**Request to transfer to the new CCA :**

Name of CCA:	
Reason(s):	
Effective Date:	
Endorsed by Teacher IC:	
Signature of Teacher IC:	

*Note: The transfer form have to be submitted to Mr Joel Chia, HOD PE/CCA by Wednesday, 17 January 2018. Form received after this date will not be accepted.*

I \_\_\_\_\_, parent / guardian of \_\_\_\_\_, am aware of my child's/ward's change in CCA.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

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For PE/CCA Department Use Only

Approved By: \_\_\_\_\_

Signature/Date: \_\_\_\_\_

Designation: \_\_\_\_\_