



### Student Referral Form

Please complete this form with all the required information.

#### Referrer's Details

Name	
Email Address	
Contact Number	
Local Bank Name	
Account Holder Name	
Bank Account Number	

#### Referree's Details

Student's Name	
NRIC/ Fin No	
Date of Birth (YYYY/MM/DD)	
Anticipated Academic Year and Month to Enroll	
Anticipated Level to Enter	
Campus	Dempsey / Centrium / Bukit Timah

**Dempsey** 73 Loewen Road, #01-21, Singapore 248843  
☎ 6259 3877 ✉ info@invictus.edu.sg 🌐 invictus.edu.sg/dempsey

**Centrium** 320 Serangoon Road, Centrium Square, #06-01, Singapore 218108  
☎ 6271 6088 ✉ centrium@invictus.edu.sg 🌐 invictus.edu.sg/centrium

**Bukit Timah** 191 Upper Bukit Timah Road, Singapore 588180  
☎ 6971 8210 ✉ admissions.bt@invictus.edu.sg 🌐 invictus.edu.sg/bukittimah

<b>Student's Name</b>	
<b>NRIC/ Fin No</b>	
<b>Date of Birth (YYYY/MM/DD)</b>	
<b>Anticipated Academic Year and Month to Enroll</b>	
<b>Anticipated Level to Enter</b>	
<b>Campus</b>	<b>Dempsey / Centrium / Bukit Timah</b>

**Terms & Conditions**

The school agrees to pay the referrer the sum of **SGD 500** for every **student** upon successful enrolment and the following conditions must be fulfilled:

- The school received full payment of assessment fee, registration fee and tuition fee including GST
- After the commencement of class; and
- Subjected to the school's Refund Policy.
- Enrolment availability is subjected to Invictus' admissions policy.
- Invictus reserves the right to make changes without prior notice.

I hereby agree to the terms and conditions set forth in this form and such is demonstrated throughout by the signature below:

<b>Referrer's Acknowledgement</b>	<b>Official Use</b>
<b>Name:</b>	<b>Checked by:</b>
<b>Signature:</b>	<b>Reviewed by:</b>
<b>Date:</b>	<b>Approved by:</b>

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