



SPECIAL EDUCATION (SPED) SCHOOL  
CERTIFICATION LETTER  
FOR SPECIAL NEEDS SAVINGS SCHEME  
(SNSS) APPLICATION

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Date: \_\_\_\_\_

To: Centre for Enabled Living  
No. 7 Maxwell Road  
#05-08, Annexe B  
MND Complex  
Singapore 069111

To whom it may concern,

**SCHOOL CERTIFICATION LETTER FOR SPECIAL NEEDS SAVINGS SCHEME (SNSS) APPLICATION**

I declare that (*Name of Person with Disability - PWD*) \_\_\_\_\_  
of (*Birth Certificate/NRIC*) \_\_\_\_\_ :

*(Please tick where applicable)*

Is currently attending (*Name of SPED school*) \_\_\_\_\_  
and was enrolled into the school on (*Date of Enrolment*) \_\_\_\_\_.

Has previously attended and has graduated\* from (*Name of SPED school*)  
\_\_\_\_\_ from (*Date of enrolment*) \_\_\_\_\_ to (*Date of  
Graduation/Departure\**) \_\_\_\_\_.

\* *delete where inapplicable*

I understand that the purpose of the above information is for the PWD to apply for the SNSS administered by Centre for Enabled Living (CEL).

Stamp of Special Education School : \_\_\_\_\_

Name of School Principal/Administrator : \_\_\_\_\_

School Address : \_\_\_\_\_

School Contact No : \_\_\_\_\_

School Principal/Administrator Signature : \_\_\_\_\_ Date: \_\_\_\_\_