

# Application Form Full-time Programmes

## A. PROGRAMME

Programmes <sup>#</sup>	Year	Intake Month				Upgrader (Yes/No)
		Jan	Apr	Jul	Oct	
WSQ Advanced Certificate in Food and Beverage Supervision						
WSQ Advanced Certificate in Hotel and Accommodation Services						
WSQ Advanced Certificate in MICE and Events						
WSQ Higher Certificate in Culinary Arts						
WSQ Higher Certificate in Pastry and Bakery						
WSQ Diploma in Tourism						
Diploma in Hotel Management						
Diploma in Culinary Skills						
Diploma in Pastry and Baking						

# Please indicates first choice of programme. Final acceptance is subjected to class availability and eligibility.

## B. PERSONAL PARTICULARS (IN BLOCK LETTERS)

Family Name (as per NRIC/ Travel Documents):

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Given Name (as per NRIC/ Travel Documents):

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

NRIC (Singaporean and PR) / Passport Number (International):

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Nationality: \_\_\_\_\_ Gender:  Male  Female

Race: \*Chinese/ Malay/ Indian/ Eurasian/ Others (Please specify) \_\_\_\_\_

Marital Status: \*Single/ Married/ Other (Please specify) \_\_\_\_\_

Date of Birth (DD/ MM /YYYY): 



 / 



 /

Residential Address (in Singapore):

Block No.: \_\_\_\_\_ Unit No.: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Street: \_\_\_\_\_

Telephone Number: (Home) \_\_\_\_\_ (Mobile) \_\_\_\_\_ (Office) \_\_\_\_\_

Email Address: \_\_\_\_\_

*\*To delete accordingly*

## C. NATIONAL SERVICE

Completed ORD Date (DD/MM/YYYY):

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Exempted (Please attach supporting documents)

Pre-enlisted

Not applicable (Singaporean females & International applicants)

Please attach  
a recent  
photograph

**D. PERSONAL PARTICULARS (CONT'D)**

Overseas Address (For International Applicants ONLY):

\_\_\_\_\_ Postal Code \_\_\_\_\_

Overseas Contact Number (For International Applicants ONLY): (Home) \_\_\_\_\_ (Mobile) \_\_\_\_\_

Mailing Address ( Tick if same as Residential Address in Singapore):

\_\_\_\_\_ Postal Code \_\_\_\_\_

**E. FAMILY PARTICULARS**

Parents/ Guardian's /Spouse's Name: \_\_\_\_\_ Relationship to applicant: \_\_\_\_\_

Contact Number: (Home) \_\_\_\_\_ (Mobile) \_\_\_\_\_ Email: \_\_\_\_\_

**F. EMERGENCY CONTACT: (please ensure that the contact person is different from section E)**

Name \_\_\_\_\_ Relationship to applicant: \_\_\_\_\_

Contact Number: (Home) \_\_\_\_\_ (Mobile) \_\_\_\_\_ Email: \_\_\_\_\_

**G. QUALIFICATIONS (Please attach copies of relevant certificates and transcripts.)**

Please state in chronological order (from most recent), all school(s) attended / currently attending and qualification(s) attained.

From (MONTH/YEAR)	To (MONTH/YEAR)	Schools	Country	Qualifications Attained
___ / _____	___ / _____			
___ / _____	___ / _____			
___ / _____	___ / _____			

Highest Qualification Level : \_\_\_\_\_ \*Primary &amp; Below / Secondary / Post-Secondary / Diploma / Degree and Above

Have you enrolled for any WSQ course(s) or module(s) with SHATEC and / or other training provider previously? Yes / No  
Please provide details on course / module title(s) and qualification attained if you have replied 'Yes' to the above and submit the certificate.

\_\_\_\_\_

**H. EMPLOYMENT HISTORY (if applicable)**

List in chronological order (from most recent).

From (MONTH/YEAR)	To (MONTH/YEAR)	Company	Country	Position
___ / _____	___ / _____			
___ / _____	___ / _____			
___ / _____	___ / _____			

**I. OTHER INFORMATION (Please circle accordingly)**

Have you ever been arrested by the police or convicted of a criminal offence? Yes / No

Have you ever been convicted in a court of law in any country? Yes / No

Have you been charged with any offence in a court of law in any country for which the outcome is not yet known? Yes / No

Have you ever been dismissed from employment for misconduct or poor performance? Yes / No

Have you ever suffered or are you suffering from any physical impairment, medical condition, allergy, depression, disease or mental illness? (Provide supporting medical documents) Yes / No

Please provide details if you have answered "YES" for any of the above questions.

**J. COMPANY SPONSORSHIP CONFIRMATION (If applicable)**

This is to certify that the applicant, (Name as per NRIC) \_\_\_\_\_ will be fully sponsored by (Company name as per ACRA) \_\_\_\_\_.

Name of contact person: \_\_\_\_\_ Designation: \_\_\_\_\_

Signature of contact person: \_\_\_\_\_

Date (DD/ MM/ YYYY):  /  /  Company Stamp: \_\_\_\_\_

Billing Company: \_\_\_\_\_ Business Reg. No: \_\_\_\_\_

Billing address: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Contact No: \_\_\_\_\_ (Office) Fax: \_\_\_\_\_ Email: \_\_\_\_\_

**Payment and GST**

Company Sponsored applicant(s): The official invoice will be handed over to the sponsored applicant(s) upon application and successful admission into SHATEC.

Please make your cheque payable to "**Shatec Institutes Pte Ltd**" and mail it to: **21 Bukit Batok Street 22 Singapore 659589**. (Please indicate your Company Name, Applicant(s) Name, Course Title and Intake on the back of the cheque). GST is not applicable for companies registered overseas.

**SSG Subsidy (Full Fee) Eligibility Criteria**

For companies that are registered or incorporated in Singapore and training is fully sponsored by the companies. Applicants must be employees who are either Singapore Citizen(s) or Singapore Permanent Residents (SPRs). Applicants must ensure that they achieve at least 75% attendance. \*Please refer to SkillsConnect at <http://www.skillsconnect.gov.sg/> for any changes or updates to the terms and conditions.

For companies claiming SSG Subsidy, please note that you are required to pay Shatec Institutes Pte Ltd the full Course fee in the event of any of the following circumstances:

- No show of applicant(s)
- Applicant(s) is/are no longer under the employment of the Sponsored company
- Applicant(s) is/are retrenched from the Sponsored company
- Subsidy rejected by SSG

**K. PERSONAL DATA PROTECTION and PRIVACY POLICY**

I understand and acknowledge that:

- SHATEC is committed to maintaining the confidentiality of my personal information and will undertake not to divulge any of my personal information to any third party without my prior written consent SUBJECT to the obligation of SHATEC to disclose to any Singapore government authority, statutory boards, agencies and / or to the organisation conferring / awarding the qualification, any information relating to me in compliance with the law and/or fulfillment of obligatory requirements associated with my enrolment to SHATEC.
- SHATEC is authorized to contact, correspond and send information for school related purposes to me through any of the contact modes as provided within this application.

**L. DECLARATION**

I hereby declare that all information provided by me in connection with this application is true, accurate and complete. I understand that any inaccurate, incomplete or false information given or any omission of information required shall render this application invalid and SHATEC may at its discretion withdraw any offer of acceptance made to me on the basis of such information or, if already admitted, I may be liable to disciplinary action, which may result in my expulsion from SHATEC. And I hereby authorize SHATEC to obtain and verify any part of the information given by me from or with any source, as it deems appropriate.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

M. OFFICIAL USE ONLY

*For exceptional cases (applicants who do not meet minimum entry requirements)*

For Use by Director, Academic and Student Development or Student Administration only	Comments	Date:
	Status: * Recommended / Not Recommended	

*\*To delete accordingly*