

Application Form Apprenticeship Programmes

A. PROGRAMME

Programmes	Year	Intake
WSQ Diploma in Food Services (Culinary Arts)		
WSQ Diploma in Hotel and Accommodation Services		

B. PERSONAL PARTICULARS (IN BLOCK LETTERS)

Family Name / Surname (as per NRIC / Passport):

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Given Name (as per NRIC / Passport):

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

NRIC (Singaporean and Permanent Resident) / Passport Number (International Applicant):

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Please attach
a recent
photograph

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 / House Number: _____ Unit Number: _____ Postal Code: _____

Street Name: _____

Contact Number: (Home) _____ (Mobile) _____ (Office) _____

Email Address: _____

Overseas Address (For International Applicant ONLY):

Postal Code: _____

Overseas Contact Number (For International Applicant ONLY): (Home) _____ (Mobile) _____

C. NATIONAL SERVICE LIABILITY

Completed ORD Date (DD/MM/YYYY):

 /

 /

Exempted (Please attach with supporting documents)

Not Applicable (Singaporean females and International Applicant)

D. FAMILY PARTICULARS

Name: _____ Relationship: _____

Contact Number: (Home) _____ (Mobile) _____ Email: _____

E. EMERGENCY CONTACT

Contact Person: _____ Relationship: _____

Contact Number: (Home) _____ (Mobile) _____ Email: _____

F. QUALIFICATIONS**Highest Qualification** (Please tick):

- | | |
|---|---|
| <input type="checkbox"/> Lower Secondary | <input type="checkbox"/> Polytechnic Diploma |
| <input type="checkbox"/> 'N' Level or Equivalent | <input type="checkbox"/> Professional Qualification & Other Diploma |
| <input type="checkbox"/> 'O' Level or Equivalent | <input type="checkbox"/> WSQ Advanced Certificate |
| <input type="checkbox"/> ITE Skills Certification (ISC) | <input type="checkbox"/> WSQ Diploma |
| <input type="checkbox"/> 'A' Level or Equivalent | <input type="checkbox"/> WSQ Specialist Diploma |
| <input type="checkbox"/> NITEC / Post NITEC | <input type="checkbox"/> University First Degree |
| <input type="checkbox"/> Higher NITEC | <input type="checkbox"/> University Post-Graduate Diploma & Degree |
| <input type="checkbox"/> Master NITEC | <input type="checkbox"/> Master or Equivalent |
| <input type="checkbox"/> WSQ Certificate | <input type="checkbox"/> Doctorate or Equivalent |
| <input type="checkbox"/> WSQ Higher Certificate | <input type="checkbox"/> Others: _____ |

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 copies of certificate.

G. EMPLOYMENT HISTORY (if applicable)

Please state in chronological order (from most recent).

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

H. OTHER INFORMATION (Please check box accordingly)

- Have you ever been arrested by the police or convicted of a criminal offence? Yes No
- Do you have any existing criminal record(s) in Singapore or overseas? Yes No
- Are you currently under police investigation in Singapore or overseas? Yes No
- Have you ever been charged with any offence in a court of law in Singapore or in any country for which the outcome is pending? Yes No
- Have you suffered, or are suffering from any medical condition, physical impairment, and psychological related illnesses? (Please provide supporting medical documents) Yes No
- Have you been diagnosed with, or experienced learning disabilities/special learning needs in previous education? (Please provide supporting documents) Yes No
- Have you been granted or have applied for access arrangements in previous examinations/assessments? (Please provide supporting documents) Yes No

Please provide details if you have answered 'Yes' for any of the above questions.

I. APPLICABLE TO SSG FUNDED COURSES ONLY

I understand and acknowledge that:

(Please check box if you are applying for a WSQ course)

- I must achieve at least 75% attendance and pass all assessments to be eligible for course fee funding by SSG.
- I will not be eligible for course fee funding by SSG in the event I fail to meet the attendance or assessment requirement.
- SHATEC is permitted to submit my personal information and records to SSG and its authorized subsidiaries, portals, channels of communication etc.
- I am obliged to provide all information deemed necessary to SSG for my course of study by completion of effectiveness surveys conducted by SSG, or its appointed auditor, or its nominated representatives.
- The funded course indicated in this application form is not one for which a grant or funding had been previously awarded to me.
- Minimum 6-month retention in the industry is recommended as part of the obligation for enjoying the funding.
- Funding is subjected to SSG's prevailing corporate policies and final approval.

J. PERSONAL DATA PROTECTION AND PRIVACY POLICY

I understand and acknowledge that:

(Please check box)

- SHATEC is committed to maintain 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 confessing/ awarding the qualification, any information relating to me in compliance with the law and/or fulfilment 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.

K. 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. 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

Date

L. 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	