**WSQ OPERATE INOCULATION AND FERMENTATION REACTORS**

**Date of Course:**

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| Course Fee : $3200.00 (exclude GST)SSG funding\* : $2240.00 SSG funding (70% of course fee)Nett Course Fee after SSG Funding : $960.00 + $67.20 (GST) = $1027.20 per participant **\* Eligibility for SSG Funding:** **Singaporean and PRs****achieve at least 75% attendance****complete & pass all required assessments** |

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| * This form will take about 10 minutes to complete.
* Please read all instructions carefully before filling in the declaration form. All information provided must be true and accurate. Incomplete application form and/or false declaration of information will lead to disqualification.
* You may submit this declaration form to SP-PACE secretariat. Application should reach Singapore Polytechnic (SP), Professional & Adult Continuing Education (PACE) Academy, 500 Dover Road, Block T1A, Level 1, Room T1A12, Singapore 139651.
* Please note that you could be requested to show proof of employment for the application. When requested, please submit the recent CPF statement **and** either employment letter or pay slip to Singapore Polytechnic, Professional & Adult Continuing Education (PACE) Academy.
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| **Part A** | APPLICANT PARTICULARS (Please fill in **­ALL** the fields) |
| Name as in NRIC : | NRIC No. : | Gender : ❒ Male ❒ Female |
| Date of Birth *(dd/mm/yyyy)* :  | Age *(as at course start date)* :  |
| Nationality : Singaporean / Singapore PR | Race : ❒ Chinese ❒ Malay ❒ Indian ❒ Others |
| Highest Educational Level :  | Email :  |
| Home Address :  |
| Contact Numbers : *(Home)* *(Mobile)* *(Office)*  |
| Employment Status: ❒ Unemployed ❒ Employed *(excludes freelancers, casual workers & self-employed)* |
| Company’s Name :  | Job Title :  |
| Does your employer contribute CPF for you? ❒ Yes ❒ No |
| Industry/Sector *(Please tick one)* :

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| ❒ Childcare❒ Cleaning❒ Education Services | ❒ Electronics❒ Hotel/F&B/Hospitality❒ Logistics/Warehousing | ❒ Manufacturing❒ Retail❒ Security | ❒ Transport❒ Others*(please state)* : |

 | Is your company a Small & Medium Enterprise, SME? (with 200 staff or below)❒ Yes ❒ No |
| Reasons for Training : ❒Relevant to current job ❒Take on additional duties in current job ❒Prepare for higher position❒Earn higher salary ❒Prepare for future job ❒Employer’s recognition ❒Other reasons *(please state)* :  |
| If the training course is relevant to your current job, reasons for not seeking company sponsorship: ❒ Company does not want to sponsor the course ❒ Company does not want to sponsor me ❒ Company has limited training funds ❒ I do no want to be bonded by the company ❒ Other reasons: |
| Salary Declaration : Current Monthly Gross Salary **$** |

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| **Part B** | DECLARATION |
| 1. I agree to co-operate with Singapore Polytechnic in the post-course evaluation exercise required by SSG. The evaluation exercise conducted by Singapore Polytechnic includes an assessment by my direct supervisor/Reporting Officer on whether I have been given a wider job scope or new responsibilities in Workplace Safety & Health related activities; and/or whether I had shown an improvement and perform better in my work within 6 months of the completion of the course.
2. I agree that should I fail to meet the 75% attendance requirement and / or fail to sit for all required assessments and / or fail to pass all required assessments, **I will be liable for the total course fee without SSG Funding.**
3. We declare that the applicant(s) have not received course subsidy previously from SSG for this course through any other training provider.
4. I declare that all information and particulars provided in this Form are true, complete and accurate and that I have not withheld or distorted any information or particulars required under this Form. I understand that if any information or particulars provided by me is false, inaccurate, distorted or misleading in any way, Singapore Polytechnic reserves the right to withdraw the funding given to me.
5. I agree that the personal information I am providing in this form can be used by the Singapore Polytechnic for the purpose of reports required by SSG.

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| Name of applicant : |  |
| Signature of applicant: |  |
| Date : |  |

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| **FOR PACE ACADEMY USE** | Please send Forms with crossed cheque (made payable to **SINGAPORE POLYTECHNIC**) to:Singapore PolytechnicProfessional & Adult Continuing Education (PACE) Academy500 Dover RoadBlock T1A, Level 1, Room T1A12Singapore 139651Tel: 67721288 Fax: 67721957Email: pace@sp.edu.sg |
| Course Fee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Option:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cheque No/Giro No : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Admit Term : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Run No: \_\_\_\_\_\_\_\_\_Receipt No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |