

COURSE APPLICATION FORM

课程申请表格



新加坡中華總商會管理學院
Singapore Chinese Chamber Institute of Business
CPE Registration No: S92SS0008J Period of Registration: 20/5/14 - 19/5/18

FOR OFFICIAL USE

Course Fee	
Receipt Number	
Received By	

COURSE TITLE

(课程名称): _____

START & END OF COURSE

DATE(课程日期): _____

Type of Application 申请类型: Company Sponsored 公司赞助

Self-Funded 个人申请

Is your company a member of SCCC? 公司是否是中华总商会会员? Yes 是/ No 否

Membership No 会员号码: _____

Is this the first time you apply for any form of Government course fee subsidy for this course?

是否首次申请本课程的政府津贴?

Yes 是

No 否

Will you be using SkillsFuture Credit to pay for the course fee?

您是否使用未来技能培训补助来支付本门课程学费?

Yes 是

No 否

Amount of Credit used:

未来技能培训补助数额: \$ _____

Pay to:

支付给

SCCIOB

My Bank Account

新加坡中华总商会管理學院

我的个人银行账户

IMPORTANT INSTRUCTIONS 重要指示

1. Please complete the application form and submit to our centre at least two weeks before the course commencement date at 47 Hill Street, #08-01, SCCC Building Singapore 179365 Tel: 63341080 Fax: 63371165

请把课程申请表格填好并在开课的两个星期前把表格交到 47 Hill Street, #08-01, 新加坡中华总商会, 邮编 179365

电话号码: 63341080 传真号码: 63371165.

2. Completed Application Form must be accompanied by

• Copy of personal identification – I/C for Singaporeans and PRs, Passport/Work Permit/Employment Pass for others.

请在呈交课程申请表格时附上以下文件:

• 一份个人的身份证(新加坡公民或永久居民)或 护照/工作准证/就业准证(其他)的复印本。

3. All payments may be made by cash or cheque. Cheque must be crossed and made payable to "SCCIOB".

请以现金或 支票付费. 支票必须注明支付给"SCCIOB".

4. Application form with incomplete information will not be considered.

本学院将不会接受不完整的课程申请表格。

5. All information provided by students will be treated in the strictest confidence. By signing the application form, you expressly consent to SCCIOB collecting, using and disclosing the personal data provided in the form for the purposes of course administration, annual reporting to the regulatory bodies and other course information.

学院保证将谨慎处理学员个人资料并妥善保管。通过填写此报名表格, 您明确同意让新加坡中华总商会管理學院收集, 使用和提供您的个人资料作为课程行政管理, 向监管机构进行的年度报告及未来课程通知用途。

Please tick here if you do not wish to have your personal data collected for course updates.

若您不同意学院使用您的个人资料, 用于发送学院活动及课程更新的信息, 请在此打勾。

PERSONAL DETAILS 个人资料

Full Name: _____ 中文姓名: _____

(Name as in NRIC/Passport/Passes 请依照身份证, 护照, 或准证所登记的姓名填写)

NRIC/ Passport / FIN No. 身份证号码/ 护照/准证号码: _____ Gender 性别: Male 男 Female 女

Home Address 地址: _____ Singapore 邮编 _____

Contact Number 联络号码: _____ E-mail Address 电邮: _____

Date of Birth 出生日期: ____/____/____ Age 年龄: _____ Highest Qualification 最高学历: _____
dd 日 mm 月 yyyy 年

Nationality 国籍: Singaporean 新加坡公民 Singapore PR 新加坡永久居民 Others 其他: _____

All information provided by students are treated with strictest confidentiality and are meant for internal usage only.

PRESENT EMPLOYMENT DETAILS 在职资料

Company Name 公司: _____

Company Address 公司地址: _____ Singapore 邮编: _____

Office No. 公司电话号码: _____ E-mail 电邮: _____

Participant's Designation 学员职位: _____

Salary 月薪: Unemployed S\$1,000 & below/以下 S\$1,000 – S\$1,499 S\$1,500 – S\$1,999
 S\$2,000 – S\$2,499 S\$2,500 – S\$2,999 S\$3,000 – S\$3,499 S\$3,500 & above/以上

Office Contact Person

公司联络人: _____

Contact Person's Designation

公司联络人职位: _____

Contact No.

联络号码: _____

Fax No.

传真号码: _____

TERMS AND CONDITIONS 附带条件与条例

Enrolment 报名

1. Singapore Chinese Chamber Institute of Business reserves the right to verify the information provided in this application form.

新加坡中华总商会企业管理学院将有权对申请人所提供的资料进行证实。

2. Singapore Chinese Chamber Institute of Business reserves the right to cancel or postpone the course due to unforeseen circumstances.

如有任何突发事故, 新加坡中华总商会企业管理学院将有权取消或延期课程日期。

SDF/SRP Application 技能发展基金/工友机能提升计划赞助

In order to qualify for SDF/SRP assistance,

3. An applicant needs to be a direct employee of his/her company's payroll.

申请人必须是贵公司的直属员工。

4. An applicant needs to be fully sponsored by his/her company.

申请人的所有学费必须由公司承担。

5. An applicant needs to achieve at least 75% attendance and undergo the assessment.

申请人必须达到 75% 以上的出勤率与参加课程指定的评估。

Payment 付款

6. All cheque payment are to be crossed and made payable to "SCCIOB". Please indicate your name and the course title behind the cheque. Please do not send any cash by mail.

所有支票必须注明支付给"SCCIOB"。请把您的姓名与课程名称写在支票的反面。请不要把现金邮寄给本学院。

7. All cheque payment are to be crossed and made payable to "SCCIOB". Please indicate your name and the course title behind the cheque. Please do not send any cash by mail.

所有支票必须注明支付给"SCCIOB"。请把您的姓名与课程名称写在支票的反面。请不要把现金邮寄给本学院。

Refund and Withdrawal 退还与退出

1. No refund is allowed unless the Institute cancels or postpones the course.

除非本学院取消或延期课程, 不然本学院将不会退还课程学费。

2. A written request for refund is required if a participant wishes to withdraw from the course. The participant may make his request via post, e-mail or fax. The request is subject to approval by the institute. Please note that Application &/or Membership fee is not refundable.

申请人如要退出课程必须以书信通知本学院。申请人可以邮寄、电邮或传真的方式发出申请。本学院将保留不批准申请的权力。

退出课程需要提交书面申请, 若有涉及报名/会员费用, 此费用将不被退还。

Our Institute's policy with regards to refunds for withdrawal is as follow:

提交退出课程的书面申请和学费退款规则如下:

学员能索取的退款比例: % of Course Fees to be Refunded:	学院收到退出课程申请日期: If Student's written notice of withdrawal is received
100%	距离开课日期七天或以上 At least 7 days before the course commencement date
75%	距离开课日期三至六天 3 – 6 days before the course commencement date
0%	距离开课日期少过三天 Less than 3 days before the course commencement date

APPLICANT'S DECLARATION 申请人的声明

I declare that all information given in this application is true and complete to the best of my knowledge. I understand that any misrepresentation or omission is sufficient grounds for rejection of the application or withdrawal of any place that may be offered and that this withdrawal may take place at any stage during the course. I understand and accept the terms and conditions set by Singapore Chinese Chamber Institute of Business. 我声明我在申请表所提供的资料全部属实与完整。我了解如果我故意隐瞒资料或提供不正确的资料, 学院将有权剥夺我上课的资格。我了解并接受新加坡中华总商会企业管理学院所规定的条例。

OTH/ADM/045/Rev1

Signature of Applicant 申请人的签名

Date 日期

Revised on 23/02/2016

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