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| **TRAINING APPLICATION FORM** |

|  |  |
| --- | --- |
| **Training Title**  |  |

|  |  |
| --- | --- |
| **Name**(*as per NRIC / Passport*) |  |
| **NRIC / Passport No.** |  |
| **Mobile Number** |  |
| **Email Address** |  |
| **Organisation / Agencies** |  |

**Please tick (√) where applicable:**

**Gender Race**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Male** |  |  | **Malay** | **Chinese** | **Indian** | **Others (please specify)** |
| **Female** |  |  |  |  |  |  |

|  |  |  |
| --- | --- | --- |
| **STATUS** | **NAME *(as per NRIC/passport)*** | **SIGNATURE** |
| **Applicant** |  |  |
|  |  |  |
| **FOR OFFICE USE: Please tick (✓)** |
| **DOCUMENT CHECKLIST** |
|  | **Copy of NRIC/Passport** |  | **2 copies of passport-sized picture**(White background) |
|  | **Copy of registration fee receipt***(non-refundable)* |  |  |
| **MANAGEMENT APPROVAL** |
| **Offer statusPlease tick (✓)** |  | **Full time** |  | **Part-time** |  | **Online** |  | **Hybrid** |
| **Student ID** |  |
| **Checked by** |  | **Approved by** |  |  |
| **Vice President - Academic** | **President** | **CEO** |