

School of Human Capital Management

Application Form



Programme Details

For the complete listing of SHRI's programmes please call 6438 0012 or e-mail: SHRIacademy@shri.org.sg.

Course Title _____

Course Intake _____

Affix a non-returnable photo here

Applicant Information*

Name (Mr/Mrs/Ms) _____
Surname Given Name

Place of birth _____ Date of birth _____ Gender: Male / Female

Citizenship _____ NRIC No. _____ Marital Status _____

For non-Singaporean citizens, please tick accordingly:

Permanent Resident Work Permit Employment Pass

National Service Liability _____ Run-out date _____

Company _____

Designation _____

Address (O) _____

Address (H) _____

Phone (H) _____ Phone (O) _____ Handphone _____

Facsimile _____ E-mail _____

Correspondence address (please tick one only)

Residence Office Other _____

Are you a member of SHRI? _____

Yes _____ No _____

(Please indicate membership no.)

How did you get to know about this programme?

Press advertisements SHRI publications
 SHRI reviews SHRI website
 SHRI mailers Others: _____

Academic Information

Certified true copies of your education certificates must be submitted with this form.

Institution	Year	Full-time / Part-time	Qualifications Achieved (Pls indicate no. of GCE 'O' Level passes)

Employment History (Years of working experience)

Organisation	Length of Service	Position Held

Company-Sponsored Applicants Only

Grant options (Please tick accordingly):

 SDF

 SRP

Is your company financing the entire course fee?

 Yes

 No
Note

For SDF/SRP funding to be approved, these criteria must be fulfilled:

1. Applicants must achieve at least 75% attendance.
2. Applicants must sit for the examination at the end of the each module/course.

Signature (immediate supervisor)

Company stamp

Name & Designation (immediate supervisor)

Date

Declaration by Applicant

I hereby declare that the information provided on this application is correct. I authorise SHRI to obtain official records, if necessary, from any educational institution that I have attended. I understand that if any information is found to be false, this application may be cancelled at any stage.

Applicant's Signature

Date

For official use

	Amount
Registration fee	
Student membership entrance fee	
Student membership subscription fee	
Course Fee	
Supplementary materials fee	
Total	
SDF/SRP	