

# Application Form

Attach your recent photo here (2 photos)

Course Applying for:

**Mode of Study**

Full Time     Part Time

**Type of Student**

International     Singaporean/PR

**Type of Application**

Walk-in  
 Agent \_\_\_\_\_  
*(specify name)*

**For official use only**

Amount:	
Receipt No.:	
Date:	
Received by:	
Batch Intake:	
Commencement Date:	

**INSTRUCTIONS:**

- Complete the form in **FULL** and return with respective application fee to:  
Parkway College, 168, Jalan Bukit Merah, Surbana One #04-01, Singapore 150168.
- Completed application form must be accompanied by:
  - A non-refundable application fee of S\$100 + prevailing GST
  - 2 passport-size photographs
  - Photocopy of NRIC or Passport
  - Letter of recommendation from sponsor or employer including reference and confirmation of years of working experience and period of relevant experience in specialty for course applied (for Advanced Diploma in Nursing courses only)
  - "CERTIFIED TRUE COPIES" of relevant academic certificates:
    - 'N'/'O'/'A' Level certificates
    - Diploma/Degree certificates
    - Relevant result transcripts
    - Other relevant academic documents
- Payment for the application (non-refundable) may be made by cash or cheque. Cheques must be crossed and made payable to "Parkway College of Nursing & Allied Health Pte Ltd".
- Application form with incomplete information or no application fee will not be considered.

**1. PERSONAL PARTICULARS**

Full Name:

(\*Mr/Ms/Mrs/Dr) (Name as in NRIC/Passport & Underline surname)

\* Delete as appropriate

Please note that this name will also be used on your examination transcript & certificate. Any future changes must be supported by documentary evidence e.g. deed poll.

NRIC No.:

(Applicable for Singaporeans & PR only)

*Parkway College undertakes to maintain the confidentiality of student's personal information and not to divulge the information to any third party without the consent of the student.*

Passport No.:

Expiry Date: 

D	D	M	M	Y	Y	Y	Y
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Address:   
 Postal Code:

Email:

Contact No.: (H)  (O)  (HP)

Date of Birth: 

D	D	M	M	Y	Y	Y	Y
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 Age:

Sex:  Male  Female

Nationality:  Singaporean  Malaysian  Others (specify): \_\_\_\_\_

Employment Status:  Singapore Citizen  Permanent Resident  Student Pass  
 Employment Pass  Work Permit  Professional Pass  
 Not applicable  Others (specify): \_\_\_\_\_

Marital Status:  Single  Married  Others

National Service:  Regular  Completed Full Time  Full-time NS man  
 Exempted  Not applicable  
 (Applicable for Singaporeans & PR only)

ORD Date: 

D	D	M	M	Y	Y	Y	Y
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 (Applicable for Singaporeans & PR only)

## 2. EDUCATIONAL QUALIFICATIONS

All copies of transcripts, certificates and degrees must be stamped “CERTIFIED TRUE COPIES” and attached together with the completed application. Certification may be made by your company. Please state down the name, NRIC No. and position of the person certifying the photocopies. Certification may also be made at Parkway College upon presentation of original academic documents.

<b>SECONDARY SCHOOL / JUNIOR COLLEGE / PRE-UNIVERSITY ('N' / 'O' / 'A' Level Or Equiv)</b>									
From				To				Title of Qualification	Institution
M	M	Y	Y	M	M	Y	Y		
M	M	Y	Y	M	M	Y	Y		
M	M	Y	Y	M	M	Y	Y		
M	M	Y	Y	M	M	Y	Y		

<b>TERTIARY EDUCATION (DEGREE / DIPLOMA)</b>									
From				To				Title of Qualification	Institution
M	M	Y	Y	M	M	Y	Y		
M	M	Y	Y	M	M	Y	Y		
M	M	Y	Y	M	M	Y	Y		
M	M	Y	Y	M	M	Y	Y		

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PROFESSIONAL QUALIFICATIONS / OTHERS									
From				To				Title of Qualification	Institution
M	M	Y	Y	M	M	Y	Y		
M	M	Y	Y	M	M	Y	Y		
M	M	Y	Y	M	M	Y	Y		
M	M	Y	Y	M	M	Y	Y		

### 3. SUPPORTING DOCUMENTS

You may wish to provide extra information which you consider could assist your application. If you have any disability which may affect your learning (eg. vision, health mobility) you should provide early advice so the College may assist you. Please attach additional information on a separate sheet if there is insufficient space.

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### 4. COMPANY DETAILS (if applicable)

Name of Company:

Address:

Postal Code:

Contact No.: (O)  (DID)

Designation:

Nature of Business:  Job Title:

Salary range:  Below \$1,000     \$1,001 - \$2,500     \$2,501 - \$4,000  
 \$4,001 - \$5,500     \$5,501 - \$6,000     Above \$6,000

Total number of years of work experience to date (NS included)     Yrs     Mths

Total number of years of work experience to date (NS not included)     Yrs     Mths

WORK EXPERIENCE: (Starting with current company and position)										
From				To				No. of yrs/mths	Company	Designation
M	M	Y	Y	M	M	Y	Y			
M	M	Y	Y	M	M	Y	Y			
M	M	Y	Y	M	M	Y	Y			
M	M	Y	Y	M	M	Y	Y			
M	M	Y	Y	M	M	Y	Y			
M	M	Y	Y	M	M	Y	Y			

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## 5. COMPANY SPONSORSHIP (if applicable)

**For company-sponsored applicant**, the full amount of the course fees must be paid.

Is your company sponsoring you for the course?  Yes  No

Are you covered under the Workforce Development Agency (WDA) scheme?  Yes  No

For company sponsored participants – Workforce Development Agency, companies sponsoring the participants are liable to pay the College the full course fees in the event of any of the following circumstances:

- Participants withdraw from the course
- Participants fail to complete the course within the College’s stipulated time frame of the course
- Participants are no longer under the employment of the sponsored company
- Participants are retrenched from the sponsored company
- WDA Claim is rejected by WDA

In the event the company ceases operation, the course fee portion supported by Workforce Development Agency shall be borne by the participant.

### COMPANY CERTIFICATION:

We certify that all information made on this application form is true and complete to the best of our knowledge. We agree that any misrepresentation or omission is sufficient grounds for rejecting the application. We authorize any checks of the above information for the purpose of verification. If admitted, the company-sponsored applicant will not be asked to absent himself/herself from lessons except for urgent assignments.

Signature and date: \_\_\_\_\_ Company Stamp: \_\_\_\_\_

Name of official: \_\_\_\_\_ Designation: \_\_\_\_\_

## 6. PARENT / GUARDIAN

To be completed by: a) all international applicants

b) Singaporean or PR applicants below 18 years old

Full Name of parent/guardian:

Passport/NRIC No.:

Address:

Postal Code:

Contact No.: (H)  (O)  (HP)

Relationship to applicant:  Occupation:

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**7. DECLARATION (all applicants must complete)****Standard Student Contract**

The Standard Student Contract is a legally binding contract between Parkway College and Parkway College's student that embodies the following mandatory requirements:

- Clear definition of course details – course title, pre-requisites, qualification awarded, course duration
- Full disclosure of all costs for tuition / non-tuition fees
- Commitment to Fee Protection Scheme (Parkway College has adopted the Student Tuition Fee Insurance with Lonpac Insurance Bhd for its students)
- Clear definition of refund policies
- Clear definition of dispute resolution mechanisms

Parkway College's students, both local and international, will be issued with a Standard Student Contract upon enrolment into a course.

I hereby apply for the course as indicated in this form. I declare that all information given is true and correct. I also agree to abide by the decision of the College as to my eligibility for the course. If accepted, I agree to abide by the rules of the College and pay the necessary tuition and non-tuition fees.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_