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| International Student Application Form  Affix  Photo  Here  (Singapore) |

**IMPORTANT**

1. Please complete the form in full and CAPITAL letters.
2. This application form is for International students applying to study in Singapore
3. Your application cannot be processed unless all required documents are attached.
4. Please ensure that all documents are officially translated into English and are notarized.
5. The information in this application form is correct at the time of printing; however course information for the Institute may be subject to change.
6. Admission to any particular course is not guaranteed, and should be assessed in accordance with procedures specified by William Angliss Institute.
7. Please always check with William Angliss Institute or Institute accredited education agent or representatives when planning your course or application.
8. Where not applicable, please indicate “N/A”
9. **Please submit completed application form with supporting documents to William Angliss Institute. Email: info@angliss.edu.sg**

William Angliss Institute commits to maintain confidentiality of student’s personal information shall not divulge any of the student’s personal information to any third party without consent of the student.

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| Section 1: course information |

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| **Course Name** | **Course Code** | **Campus** | **Intake** |
| Advanced Diploma of Hospitality Management | SIT60316 | Singapore |  |

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| Section 2: Applicant DETAILS (please include a copy of identification page of your passport) | | | | |
| Family Name (as in Passport): | | | | |
| Given Name (as in Passport): | | | Alias, if any (If Yes, please provide certified document) | |
| Nationality (as in passport): | Passport No.: | | Expiry Date (DD/MM/YYYY): | |
| Date of Birth (DD/MM/YYYY): | Gender: | | Marital Status: | |
| If you are not single, will your spouse and/or any dependents travel to Singapore with you? ☐ Yes ☐ No  If yes, please provide their names and their relationship to you:  Name: Relationship: Age: | | | | |
| **If you are staying in Singapore, please specify your Foreign Identification Number (FIN) and expiry date (DD/MM/YYYY:**  Student Pass FIN No.: Expiry Date:    Name of Institution:  Dependent Pass FIN No. : Expiry Date: | | | | |
| Email Address: | | Overseas Contact No.(Home Country)  (Home):  (Mobile): | | Singapore Contact No:  (Home):  (Mobile): |

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| Section 3: residential ADDRESS IN singapore (IF APPLICABLE) | | | | | |
| House/Block No.: | Street Name: | | | Unit No.: | Postal Code: |
| Section 4: OVERSEAS ADDRESS IN HOME COUNTRY | | | | | |
| Address: | | | | | |
| City: | | Country: | Postal Code: | | |

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| section 5: CONTACT DETAILS (FAMILY) | | | | | |
| Name of Parent | | | Relationship to Applicant | | |
| Parent’s Contact No.  (Home):  (Mobile): | | | Parent’s Email | | |
| **section 6: UNDER 18 (It is compulsory for all overseas students below 18 years of age who do not have immediate family in Singapore to**  **stay in a school-approved boarding school or with a home-stay guardian)** | | | | | |
| Name of Guardian: | | | | Guardian’s Relationship to Applicant: | |
| Guardian’s Address in Singapore:  Post Code | | | | Guardian’s Contact No. in Singapore: | |
| Guardian’s Email: | |
| Guardian Passport or FIN No\*: | Expiry Date (DD/MM/YYYY): | | | | Country of Issue: |
| Signature of Guardian and date (DD/MM/YYYY): | | Signature of Parent and date (DD/MM/YYYY): | | | |

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| section 7: applicant’s EDUCATION background (Please provide certificates and transcripts) |

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| Qualifications Attained | School Name | Country/State | Start Date | Completed Date |
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| section 8: english proficiency (please provide proof of english proficiency) |
| English is your first language  English was the language of instruction in your previous studies  I completed an approved English language test (complete details below and ATTACH EVIDENCE)  IELTS Date taken (DD/MM/YY)  TOEFL Date taken (DD/MM/YY)  PTE Academic Date taken (DD/MM/YY)  Other English test score Date taken (DD/MM/YY)  Results (if known)  **Overall**  Listening  Reading  Writing/TWE/ER  Speaking  I completed an English course previously (attach evidence)  Name of English language course:  Name of English language provider/institution:  Start Date: Completion Date: |

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| sectioN 9: Applicant’s employment background (if any) |

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| Name of Company | Position | From  (DD/MM/YYYY) | To  (DD/MM/YYYY) | Location |
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| **section 10: Siblings details (Attach a separate sheet if there are more than 3 siblings)** | |
| **1st SIBLING** | |
| Full Name: | Relationship to Applicant: |
| Date of Birth: | Occupation: |
| Nationality: | Country of Residence: |
| **2nd SIBLING** | |
| Full Name: | Relationship to Applicant: |
| Date of Birth: | Occupation: |
| Nationality: | Country of Residence: |
| **3rd SIBLING** | |
| Full Name: | Relationship to Applicant: |
| Date of Birth: | Occupation: |
| Nationality: | Country of Residence: |

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| **section 11: SponsoRS details (Attach a separate sheet if there are more than 3 sponsors)** | |
| **1st SPONSOR** | |
| Name: | Relationship to Applicant: |
| Occupation: | Annual Income: |
| **2nd SPONSOR** | |
| Name: | Relationship to Applicant: |
| Occupation: | Annual Income: |
| **3rd SPONSOR** | |
| Name: | Relationship to Applicant: |
| Occupation: | Annual Income: |

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| section 12: other information | |
| **Disability/Allergies**  Do you have any disability / impairment / long‐term medical conditions that may affect your studies?  Yes   No | If ‘Yes’, please provide details: |

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| section 13: pre-course counselling   * Course counselors and Agents to brief and assist students/parents in accordance to this checklist at the point of inquiry. * Students to tick the left box accordingly and sign this form at the end of the Pre-course counseling session. |

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| **SCHOOL INFORMATION** | |
|  | WAI, Singapore Campus information (location, general description of facilities, etc.) |

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| **COURSE INFORMATION** | |
|  | Course admission requirements (including exemptions), English language requirement and procedures. |
|  | Course structure, modules and outline, duration, structure, intakes, assessment schedules, attendance requirements, industry placement programme, promotion, award criteria, type of certification awarded. |
|  | Course counselling to match the aspirations of the Student with course learning outcome. |
|  | Promotion and award criteria, including any special conditions, the type of certification that will be awarded and the opportunities for further education / graduation opportunity. |

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| **FEE PAYABLE & PAYMENT METHODS** | |
|  | Total payable fee (tuition fees, payment schedule and other applicable miscellaneous fees). |
|  | Payment modes and methods acceptable by the WAI, Singapore. |
|  | Tuition Fees payment can only be made after Student Contract has been duly signed. |

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| **STUDENT CONTRACT, FEE PROTECTION SCHEME (FPS) AND CPE WEBSITE** | |
|  | Terms and conditions of the Standard PEI Student Contract. |
|  | Fee Protection Scheme (FPS) adopted by the WAI, Singapore. |
|  | Medical Insurance Scheme (compulsory) provided by WAI, Singapore. |
|  | Reference to CPE’s official website (www.ssg.gov.sg). |

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| **TRANSFER/WITHDRAWAL/REFUND** | |
|  | Transfer, withdrawal, deferment and refund policy and procedures |

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| **STUDENT SUPPORT SERVICES** | |
|  | Student support services provides by Student Services Team. |
|  | Minimum Student Attendance Requirements and Attendance Taking Policy. |

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| **INFORMATION FOR INTERNATIONAL STUDENTS** | |
|  | Student’s Pass and application requirements, documents and procedures. |
|  | Relevant Singapore Laws especially relating ICA and Ministry of Manpower (MOM):   * Student Pass holders are not permitted to engage in any form of employment or attend an industrial attachment/internship programme, whether paid or unpaid, without a valid work pass issued by Ministry of Manpower. * Laws on driving, drugs, alcohol abuse, smoking, traffic and littering. |
|  | Personal and medical insurance, general healthcare services in Singapore. |
|  | Accommodation and cost of living in Singapore. |

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| section 14: Declaration by applicant |

1. I am satisfied with the pre-course counseling that I have attended. I hereby acknowledge and certify that the above information has been clearly communicated to me.
2. I hereby declare that all the information and documents provided in this enrolment form are complete and accurate to the best of my knowledge.
3. I understand that any misrepresentation or omission of information may result in my disqualification from consideration for admission to William Angliss Institute, Singapore.
4. I understand that at the time of enrolment I will be required to supply originals of all documents used to support this application.
5. I acknowledge that the Institute reserves the right to alter any course, subject, admission requirement or fee without prior notice.
6. I acknowledge that I have read and understand the description of the program/s that I am applying for.
7. I declare that I am applying to be a genuine temporary entrant to Singapore and as a genuine student and that I have read and understood conditions relating to these requirements. (https://www.ica.gov.sg/apply/studentpass/apply)
8. I understand as an international student who holds student’s pass is not permitted to work either full or part-time while studying in William Angliss, Singapore while living in Singapore.
9. I understand that if I am enrolled as a full time student, I am deemed as having opted in for the group medical insurance provided by William Angliss Institute, Singapore.
10. I have read the Personal Data Protection Notice Act (PDPA) (<https://www.angliss.edu.sg/students/data-protection>) and consent to William Angliss Institute processing my personal data in accordance with the Notice.
11. I acknowledge that any photographs and/or video footage taken by William Angliss Institute, Singapore are the property and copyright of William Angliss Institute, Singapore and can be used for the purposes of promoting and publicly acknowledging the relationship.
12. I will not hold the Institute responsible should my application to study at WAI be rejected by either the Immigration & Checkpoints Authority (ICA).
13. I am aware of the tuition and living costs of my stay in Singapore and have the financial capacity to meet such costs for the duration of my course. I will make timely payments of any fees or associated costs.
14. I declare that my signature is true and correct and matches the signature in my passport, if not signed electronically.

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| Applicant’s Signature (Same signature as in passport) | Signature of Parent/Guardian\* |
| Date (DD/MM/YYYY): | Date (DD/MM/YYYY) |

\*Note: Applicant declaration must be signed by a parent or legal guardian if the student is under 18 years of age

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| section 15: Agent details (If applicable) |

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| Agency Name: | Agent Branch office (if any): |
| Agent Staff Name: | Signature of Agent and Date (DD/MM/YYYY) |

DISCLAIMER: William Angliss Institute respects your privacy. The information you have provided will not be given to any third parties, and will only be used internally. Upon graduation, you will automatically become a part of the William Angliss Institute Alumni. Please note: you will be given the opportunity to unsubscribe at the time of completing your course. We have made every effort to ensure that the information contained in this document is correct at the time of printing. William Angliss Institute reserves the right to change the admission requirements, fees and units of competency in listed courses whenever necessary. All reasonable attempts will be made to publish the most up-to-date information, but course details can change, and you will always find the most current information on our website at www.angliss.edu.sg